

Electronic Report to the Board

Report of the COVID-19 Response Mechanism

GF/B50/ER06

Board Decision

Purpose of the paper: This document sets forth the Secretariat's recommendation on additional funding from the COVID-19 Response Mechanism for Board approval.

GF/B50/EDP07 Additional Funding from the COVID-19 Response Mechanism

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Decision

GF/B50/EDP07 Additional Funding from the COVID-19 Response Mechanism

The Board:

1. Notes its decision in GF/B48/DP03, which approves C19RM funds to be awarded through 30 June 2023, with opportunity for subsequent C19RM Portfolio Optimization awards and implemented through 31 December 2025;
2. Approves the additional funding recommended for each country listed in Table 1 of GF/B50/ER06 (“Table 1”); 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 previously approved principles under GF/B44/EDP18.

This decision does not have additional budgetary implications for operating expenses.

Executive Summary

Context and Input Received

The Secretariat recommends the approval of additional funding through the COVID-19 Response Mechanism (C19RM) for Mozambique up to an amount of **US\$ 20,061,738**.

The country awards in Table 1 are recommended by the Secretariat following internal and external review processes, which included input from the COVID-19 Technical Advisory Group (CTAG) and Grant Approvals Committee (GAC) partners.

For this C19RM Additional Funding Request, the Secretariat reviewed:

- (i) Visibility on reinvestments, the technical soundness of the request and capacity to provide the desired impact within the implementation period.
- (ii) Strategic focus of the investment and alignment with C19RM Technical Information Note and Guidelines.
- (iii) That the request demonstrates the required strategic shift.
- (iv) That engagement with health systems and pandemic preparedness and response coordination governance bodies and inclusion of community and civil society engagement has taken place.
- (v) Funding gap analysis.
- (vi) Operational feasibility: the feasibility and assumptions of proposed activities and the associated budget, including effective execution and utilization of existing C19RM funds.
- (vii) Complementarity/potential duplication with other available sources of funding including the HIV, tuberculosis (TB) and malaria country allocation for Grant Cycle 7 (GC7)
- (viii) Appropriateness of procurement channels and evaluating sourcing implications of the health products requested.
- (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.
- (x) Value for money.

All relevant documents relating to the Secretariat's recommendation are accessible through [this link](#).

For each country listed in Table 1, the following documents are provided to substantiate the Board decision:

- C19RM Additional Funding Request submission package.
- C19RM Portfolio Optimization Wave 2 Detailed Budget excluding reinvestments (as revised for final recommendation for Board approval, if applicable).
- C19RM Portfolio Optimization Wave 2 Health Product Management Template excluding reinvestments (HPMT).
- C19RM Consolidated Performance Framework (PF).

Input Sought

The Board is requested to approve decision point GF/B50/EDP07: Additional Funding from the COVID-19 Response Mechanism.

Table 1: Secretariat's Recommendation on Additional C19RM Funding

N	Applicant	Grant Name	Recommended Additional Funding per Grant	Recommended Additional Funding for Board Approval	Quality Demand Funded by Savings per Grant	Quality Demand Funded by Savings	Previously Approved C19RM funding ¹	Total C19RM Funding
1	Mozambique	MOZ-C-CCS		US\$ 20,061,738	US\$ 3,585,648	US\$ 33,085,095	US\$ 175,472,233	US\$ 195,533,971
		MOZ-H-FDC			US\$ 1,536,609			
		MOZ-H-MOH	US\$ 20,061,738		US\$ 27,962,838			
		MOZ-M-MOH						
		MOZ-M-WV						
		MOZ-T-MOH						
Subtotal (US\$)			US\$ 20,061,738	US\$ 20,061,738	US\$ 33,085,095	US\$ 33,085,095	US\$ 175,472,233	US\$ 195,533,971

¹ This includes C19RM funds previously approved by the Secretariat in 2020 to 2023 as well as awards previously approved by the Board.

Summary of the Deliberations of the Secretariat's C19RM Investment Committee (IC) on Additional Funding Recommendations

Additional funding to finance prioritized demand from C19RM Portfolio Optimization requests

In November 2022, the Board approved award of C19RM funds through 30 June 2023, with opportunity for subsequent C19RM Portfolio Optimization, and implementation through 31 December 2025, across the 2020-2022 and 2023-2025 allocation periods. The Board acknowledged the shift in countries' priorities towards longer-term investments in health systems' infrastructure and capacities for pandemic preparedness and response and stressed the need to facilitate careful planning of such investments, including alignment with funding requests for the 2023-2025 allocation period.

The Board decision affirms that C19RM implementation will continue to cover needs for: (i) COVID-19 control and containment interventions; (ii) COVID-19 risk-related mitigation measures for programs to fight AIDS, TB and malaria; and (iii) expanded reinforcement of key aspects of health systems as necessary, but is expected to focus on shifting funds towards C19RM strategic priorities that underpin longer-term investments in health systems strengthening and pandemic preparedness and response.

C19RM additional funding of US\$ 20,061,738 is recommended by the Secretariat to (i) operationalize the Audit and Finance Committee approval of an increase in the total C19RM sources of funds from US\$4.817 billion² to US\$4.981 billion;³ (ii) operationalize the extension of the timelines for the award and use of funds for C19RM in line with Board decision GF/48/DP03; and (iii) support reshaping of the C19RM portfolio to align investments with identified strategic priority areas for C19RM Reinvestments and Portfolio Optimization. These priority areas include: (a) surveillance system strengthening, (b) improvements to laboratory systems and diagnostics, (c) human resources for health and community strengthening, (d) medical oxygen, respiratory care and therapeutics, and e) health product and waste management systems.

In this report, in line with thresholds requiring Board approval, the Secretariat recommends to the Board additional C19RM funding for immediate award to Mozambique.

Making the Strategic Shift: Reinvesting C19RM available funds and investing available funds from C19RM Portfolio Optimization

The Secretariat implemented five strategic actions to operationalize the shift including: (i) refining the C19RM Portfolio Optimization Framework to inform Wave 2 investment decisions; (ii) ensuring visibility of reinvestment landscape for each country; (iii) portfolio segmentation and differentiation, and optimization of country and Global Fund resources; (iv) identifying countries for increased or sustained significant Resilient and Sustainable Systems for Health (RSSH) investment to further prioritize for C19RM Portfolio Optimization Wave 2 Additional Funding; and (v) understanding what it will take to execute the shift at country and portfolio level, including rethinking implementation arrangements and technical assistance needs that can be covered through expansion and extension of centrally-managed limited investments (CMLIs).

² GF/AFC19/DP04

³ GF/AFC20/DP03

The additional funding through C19RM Portfolio Optimization Wave 2 was awarded to 26 countries,⁴ for investments that support the shift to longer term systems strengthening and pandemic preparedness, including the four countries recommended here for Board approval.

Principles and criteria for C19RM Portfolio Optimization Wave 2

The prioritization for C19RM Portfolio Optimization Wave 2 refocused investments based on the following key principles including: (i) invest to maximize impact and use of available C19RM funds; (ii) concentrate investments and demonstrate the strategic shift to achieve impact – focusing on defined RSSH and pandemic preparedness strategic priorities; (iii) leverage C19RM to maximize synergies and complementarity with 2023-2025 allocation period RSSH investments in line with the mandate of C19RM and value proposition of extended implementation; (iv) optimize business processes and operations, with bolder push for efficiencies and value from Global Fund and country resources; “take work off the table” to streamline transaction costs and refocus resources on 2023-2025 allocation period impact; and (v) maintain urgency, agility and rapid deployment of funds to accelerate delivery of results, maximizing time for implementation where required.

Specifically, the IC made determinations of reinvestments and additional funding based on the overall goal of maximizing impact and use of funds, and in line with the following criteria:

- Quality of C19RM Portfolio Optimization Additional Funding Requests – robustness or maturity of program design, based on systematic Secretariat review and GAC/CTAG partner assurance.
- Additional technical and second-line reviews across Secretariat functions – to drive investments, ensure quality and drive results in the pre-defined programmatic priorities in systems strengthening and pandemic preparedness.
- Ensuring synergies and complementarity of C19RM and 2023-2025 allocation period funding streams.
- Maximizing impact and measurable results, with robust Performance Frameworks and Workplan Tracking Measures – to enhance monitoring and support implementation, track delivery of desired results within the implementation period.
- Understanding what is required to execute the shift – demonstrating what is operationally feasible within the implementation period, including implementation arrangements, capacity gaps and concerns related to technical and operational feasibility, risks and mitigation measures, as well as implementation support and technical assistance needs, leveraging CMLIs.
- Financial review and in-depth understanding of current programmatic and grant financial position, outcome of reinvestment within C19RM grants and finance assurance on portfolio alignment with the strategic shift. Providing clear visibility on investment and reinvestment landscape – including utilization of funds already awarded/absorptive capacity, expenditure; projected liability, savings and funds available for reinvestment to finance the strategic shift.
- Demonstrated country need and health finance analysis to understand evolution of external funding landscape (including complementarity with World Bank and Pandemic Fund investments), availability of other sources of funding (including domestic financing of the health system), macro-economic context and potential sustainability of investments.

⁴ List of countries that received C19RM Portfolio Optimization Wave 2 Additional Funding Award: Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Ethiopia, Ghana, Guinea, Guinea-Bissau, Haiti, Indonesia, Liberia, Madagascar, Malawi, Mali, Mozambique, Namibia, Philippines, Senegal, Sierra Leone, South Sudan, Togo, Zambia, Zimbabwe. Details on awards by country and by strategic priority area have been shared with the Board through the [July-September 2023 Report to the Board](#).

- Risk assurance modalities, including identification of strategic actions, including legal requirements and management actions.
- Engagement of key stakeholders including the Country Coordinating Mechanism (CCM), and with health systems and pandemic preparedness and response coordination governance bodies and inclusion of community and civil society engagement.

Summary of the Secretariat's C19RM IC Additional Funding Review and Recommendations

Mozambique HIV and TB Centro de Colaboração em Saúde (MOZ-C-CCS), Fundação para o Desenvolvimento da Comunidade (MOZH-FDC), Ministry of Health of Mozambique (MOZ-H-MOH)

Background

Mozambique has been confronting substantial security challenges in its northern region, where terrorism attacks have been occurring since 2017. This has led to the displacement of approximately 800,000 people, resulting in significant humanitarian implications, including issues related to healthcare, water, sanitation services and food. The country's health system is already strained due to limited resources and inadequate infrastructure, leaving it vulnerable to infectious disease outbreaks, including COVID-19, where it ranks 130 out of 195 countries on the Global Health Security Index.

The country is also undergoing important epidemiological shifts, facing a triple burden of disease: endemic infectious diseases, a growing burden of non-communicable diseases, and an increase in trauma-related issues.

To address these multifaceted challenges and mitigate associated risks, Mozambique developed the National Action Plan for Health Security (NAPHS, 2023-2027) built off their 2016 Joint External Evaluation, which was approved in November 2022, and places a strong emphasis on enhanced multisectoral coordination, adopting a One Health approach. The NAPHS has the overarching goal of better preventing, preparing for, responding to, and recovering from health emergencies, given the increasing frequency and severity of such events.

C19RM Funding Request

Activities funded through this proposal are designed to address prioritized interventions by tackling specific challenges in pandemic preparedness and response. These include strengthening multisectoral coordination and collaboration, enhancing capacities in laboratory systems and the workforce, improving resilience of routine services (i.e., laboratory diagnostics), early detection and response to outbreaks, and fortifying a multi-sectoral system for the prevention, detection, and response to health emergencies.

The funding will support the development and implementation of national policies and guidelines, the establishment of a national coordination mechanism, bolstering the country's

notifiable epidemic-prone disease surveillance system, and the enhancement of capabilities of health workers at the community level.

Moreover, these activities increase the identification and awareness of antimicrobial resistance by advocating for the rational use of antibiotics and initiating health facility-based surveillance and stewardship programs. They will also bolster primary health care by improving the country's proficiency in early outbreak detection and management at the community level, reinforcing the referral system, and promoting community involvement in pandemic preparedness and response.

A multi-sectoral system is necessary, within the context of One Health, where relevant sectors (animal, human and environmental health) are able to coordinate interventions for pandemic preparedness and response (PPR), as many infectious diseases are zoonotic. The proposed interventions taken together will allow for the country to be well prepared and able to respond to epidemics as soon as the threat is detected, in a coordinated effort. It is important, for sustainability of interventions that the necessary supplies are available when needed, and as such, the supply-chain system needs to be strengthened with adequate operations and a maintenance plan for essential equipment.

Key stakeholders, including relevant government bodies, pandemic preparedness coordination entities, health systems governance structures, technical and donor partners, civil society, and vulnerable populations, have been integral in developing and deciding on this additional funding request.

Furthermore, this request was formulated in tandem with the 2023-2025 funding request to ensure a complementary approach. The proposed interventions are cross-cutting, multi-disease and promote integration to boost and sustain HIV, TB and malaria outcomes, complementing the 2023-2025 funding cycle investments in: i) laboratory strengthening; ii) focus on community health workers (CHW); strengthened community systems and responses (with greater involvement of the communities themselves); iii) health facility waste products management and supply chain management systems strengthening, and iv) supporting integrated "collaborative" disease surveillance.

The Secretariat recommended the following activities to be prioritized for reinvestment and immediate award in line with the C19RM strategic pillars.

Surveillance system strengthening

- Establishment of the National Integrated Center for Public Health Emergencies using the One Health approach. This is a continuation from C19RM 2021 and co-funding with the Bill and Melinda Gates Foundation.
- Support the Ministry of Health (MoH) and National Institute of Health (Instituto Nacional de Saúde) surveillance department to coordinate national surveillance and emergency response, including outbreak investigation and analytics.
- Develop and implement holistic and integrated disease surveillance strategies for: 1) Transition from COVID-19 surveillance to integrated respiratory viral disease surveillance, microbiology surveillance; 2) internally displaced populations at all levels, including community; 3) sentinel surveillance for emerging and re-emerging infections with epidemic and pandemic potential; 4) environmental surveillance, including laboratory-based waste water surveillance for pathogens with pandemic or epidemic

potential (cholera, salmonella, rotavirus and other enteric viruses, SARS COV-2, Adenovirus, Astrovirus, Hepatitis); and 5) Customization of SIS-COVE to incorporate event based surveillance for rapid identification of unexplained deaths or surge in deaths at community level.

- Scale-up implementation of the three-level model of the national Field Epidemiology and Laboratory Training Program - FELTP (Frontline, Intermediate and Advanced).
- Strengthening international health regulation implementation by improving ports of entry/border functions including strengthening collaboration and communication with neighboring countries.

Laboratories and diagnostics

- Strengthening of diagnostic capacity is highlighted as a priority for both the Directorate of National Medical Assistance (Direção Nacional de Assistência Médica, DNAM) and the Instituto Nacional de Saúde (INS), with an emphasis on antimicrobial resistance. The proposed activities will be refined based on both LabMap and LabNet assessments currently being undertaken in-country.
- Biosafety and biosecurity will be strengthened with the establishment of a BSL3 laboratory to serve as national reference laboratory for TB and other pathogens.
- Gasometry, an activity initiated with C19RM-2021 funds, will be supported for one more year, and transitioned to domestic funds in 2025.
- DNAM plans to add 8 CT scans and 15 fixed x-ray units to complement the existing radiology and imaging network. This is part of the approved national strategy and will be complemented with support from the International Nuclear Energy Agency on human resource capacity development.

Human resources for health and community systems

- For human resources, community systems strengthening, and infection prevention and control, the focus will shift to mapping and bolstering the capacity of Civil Society Organizations (CSOs) for emergency responses. This includes scaling up and strengthening the CHW network to be primed for public health emergencies. There will be 1,160 CHWs funded in the next cycle through the 2023-2025 allocation period.
- Other key priorities include multi-sectoral workforce strategic planning, widening coverage of field epidemiology training programs (all three levels), including Global Laboratory Leadership Program and strengthening capacity of Rapid Response Teams. To complement this support and under RSSH, activities under the Global Laboratory Leadership Program initiated during GC6 will continue in the next funding cycle.

Medical oxygen, respiratory care and therapeutics

- The oxygen piping project for seven hospitals is ongoing with significant delays. In order to accelerate implementation, funding for project management and technical support has been included in the new proposal.

Health Product Management Systems

- Funding under C19RM Additional Funding Request complements the proposal submitted under for the 2023-2025 allocation period for RSSH, prioritizing the reform of the supply chain system, the development of the updated national strategic plan for pharmaceutical supply chain (Plano Nacional de Logística Farmacêutica, PELF), the consolidation of the Control Tower (Plano Estratégico de Sistema de Informação Logística), and the optimization of the distribution network. These are implemented in close collaboration and synergy with other financial and technical partners, particularly USG operations partners.
- To address the immediate funding challenge of last mile distribution (Via Classica, from central to provincial level), C19RM includes funds to continue the services initiated via UNICEF up to mid-2025. This partnership was initiated in Q4-2023 using GC6 savings to restore the distribution of essential medicines including TB and malaria commodities.

Other Considerations

Funding Landscape

There are several international funding and development actors in Mozambique including USAID, FAO, Gates Foundation and WHO, who contribute to investing in similar strategic priority areas. Additionally, there are a number of national stakeholders that play a role in the prevention and preparedness of epidemics, pandemics, and zoonotic diseases. The Investment Committee noted that there is no potential overlap/ complementarity with the Pandemic Fund as Mozambique was not allocated funds under their first call for proposals.

US President's Emergency Plan for AIDS Relief (PEPFAR) supports the Field Epidemiology and Laboratory Training Program (FELTP) to build the workforce capacity. The Global Fund investment is complementary as it covers the scale-up of the implementation of the three-level pyramidal model (Frontline, Intermediate and Advanced). The objective is to accelerate the achievement of national level, provincial and district goals set in the FELTP strategic plan.

In addition, the maintenance of laboratories is also supported by other funding sources such as PEPFAR, the National Public Health Institute and other research projects. BMGF is funding laboratory initiatives at the National Institute of Health and it is also providing technical assistance (TA) through implementing partners such as Resolve to Save Lives. During the review, no duplication was found with the support through other partners.

Implementation Arrangements

Mozambique's current funding execution structure comprises the following Principal Recipients (PRs): MoH's national programs for HIV, TB, and malaria; World Vision; Fundação para o Desenvolvimento da Comunidade (FDC); Centro de Colaboração em Saúde (CSS). Moving forward, the disbursement of additional funds will be channeled through the HIV program under the MoH and two grants for CSOs, specifically for CCS and FDC.

Execution Risks and Mitigating Actions

- Given the funding size, PR capacities, and complexity of the proposed operation, the governance and coordination of PPR activities are rated as high risk. To address this risk the Secretariat is planning a capacity assessment of the key implementer, this will inform the development and support to the PR to coordinate and steer this investment working closely with national counterparts.
- To address the operational risks associated with health procurement, a comprehensive risk mitigation strategy is planned. This involves a robust action plan that encompasses key procurement and project milestones, streamlining processes to minimize delays, and enhancing communication channels with MoH. Implementing regular spot checks and audits will help identify potential bottlenecks and inefficiencies, allowing for timely adjustments. Establishing contingency plans for supply chain disruptions is planned to safeguard against unforeseen challenges. Collaborative efforts with relevant governmental bodies, international organizations, and private sector partners are planned and will provide additional support and expertise, contributing to the overall success and sustainability of health procurement initiatives.
- Risks associated with the ability of the grant recipients to report on community level data exist due to the fact that the community level data systems are not interoperable with the national health information system. Relevant mitigation actions planned.
- Risks associated to flow of funds arrangements to provinces in MoH grants and overall challenges in internal processes and controls will be addressed through LFA dedicated spot-checks on the implementation of the financial mechanisms and an oversight plan.

GAC/CTAG Review and Recommendations

GAC/CTAG acknowledged a rigorous and inclusive C19RM Additional Funding Request development process involving representatives of MoH, impacted communities and CSOs. GAC/CTAG considered the funding request as technically sound and highlighted the following issues for Secretariat's consideration:

- Partners found the Mozambique Full Funding Request sound. They agreed that the request engaged key populations and the interventions strengthened the community rights and gender aspects of the COVID-19 response. Partners also welcomed the gender-based violence focus of proposed interventions.
- Partners stated that the Performance Framework required more robust indicators given the magnitude of investment. Additional indicators were proposed by the Secretariat to enhance the monitoring of surveillance systems and oxygen system functionality, along with community health system strengthening efforts.
- Technical partners' consistent feedback emphasized the need for focus on sustainability, clarity of planning, and monitoring/accountability measures. This was integrated into the workplan tracking measures in line with strategic priorities.
- Addressing Health Product Management & Waste Management Systems, the partners called for prioritizing infection prevention and control over antimicrobial consumption monitoring due to budget constraints. This was taken under advisement and integrated efforts in antimicrobial resistance and lab investments will sufficiently support the related activities, with the possibility of further efficiencies and savings being identified.

IC Review and Recommendations

- The Investment Committee (IC) acknowledged the overall robust investment request, well-coordinated review and strong business case.
- Overall, Mozambique is achieving the strategic shift with funding for health and community systems moving from 18% of the total funding to 60%, and interventions for COVID-19 control and containment reducing from 66% of the total funds to 32% post PO wave 2. Scale up focuses on laboratory systems, health product management systems and surveillance systems activities.
- Technical reviewers emphasized the good level of savings from a portfolio management perspective, while also acknowledging the ambitious nature of the funding proposal. They were comfortable with the robust work planning support and monitoring activities put in place for accountability.
- While the risk assessment of this proposal was high overall, reviewers felt that they were justified. The Secretariat worked extensively with TAP to finalize the performance framework and address the IC's proposed modifications.
- Supply operations emphasized that the areas of proposed investments were sound, adding that strengthening efforts are recommended for the Procurement Department, enhancement of commodity logistics management systems, key population (KP) mapping, and training in new information and communication technologies to maintain social mobilization. Community-based organizations and KP groups are to be equipped to ensure their continued involvement and participation in health responses.
- The Secretariat flagged weaknesses in supply chain operations and recommended a series of measures including funding the supply chain working group; expanding details of warehouse needs/cost assumptions/partners; and including budget provision to strengthen the management of laboratory commodities and develop the national waste management strategy.
- The secretariat will continue to assess and monitor the use of funds and cost effectiveness of investments in health products and waste management.

Annex 1 – Relevant Past Decisions

Pursuant to the Governance Plan for Impact as approved at the Thirty-Second Board Meeting⁵, the following summary of relevant past decision points is submitted to contextualize the decision point proposed in Section 1, above.

Relevant past Decision Point	Summary and Impact
GF/B50/ER02: Report of the COVID-19 Response Mechanism November 2023	The Board approved additional funding requests for the following four countries: Burkina Faso, Ghana, Indonesia, and South Sudan.
GF/B48/DP03: Extension of the COVID-19 Response Mechanism ⁶ November 2022	This decision point approved that: <ul style="list-style-type: none"> (i) C19RM funds may be awarded through 30 June 2023, with opportunity for subsequent C19RM Portfolio Optimization awards; (ii) C19RM funds may be implemented through 31 December 2025 to finance interventions across the Sixth and Seventh Replenishment periods; (iii) C19RM funding requests will continue to be developed through appropriate, multi-sectoral consultation and fully inclusive decision-making; (iv) Up to 4.5% of C19RM funds (an increase from the prior ceiling of 3%) may be used by the Secretariat to cover, additional management and operating costs related to the extension of C19RM; and (v) All other parameters of C19RM under GF/B46/EDP06 remain unchanged.
GF/AFC20/DP03: Approval of Available Sources of Funds for the COVID-19 Response Mechanism October 2022	The Audit and Finance Committee approved an additional amount of US\$164 million as available sources of funds for C19RM.
GF/AFC20/DP02: Approval of Available Sources of Funds for Optimization and Financing Unfunded Demand for the COVID-19 Response Mechanism October 2022	The Audit and Finance Committee approved US\$400 million of forecasted unutilized C19RM funds as available sources of funds and acknowledged that such amount will be used to award C19RM funds through 31 March 2023.

⁵ GF/B32/DP05: Approval of the Governance Plan for Impact as set forth in document GF/B32/08 Revision 2 (<http://www.theglobalfund.org/Knowledge/Decisions/GF/B32/DP05/>)

⁶ <https://www.theglobalfund.org/kb/board-decisions/b48/b48-dp03/>

Relevant past Decision Point	Summary and Impact
GF/B46/EDP06: Extension of the COVID-19 Response Mechanism and COVID-19 Operational Flexibility ⁷ December 2021	The Board approved a further extension of the timelines for the receipt and award of funds for the Global Fund COVID-19 Response Mechanism based on further modifications proposed by the Secretariat.
GF/B44/EDP18: Second Extension of C19RM Timeline and Operational Flexibility for COVID-19 ⁸ March 2021	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.

⁷ <https://www.theglobalfund.org/kb/board-decisions/b46/b46-edp06/>

⁸ <https://www.theglobalfund.org/kb/board-decisions/b44/b44-edp18/>