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COVID-19 RESPONSE MECHANISM

Updates on C19RM and Pandemic Preparedness
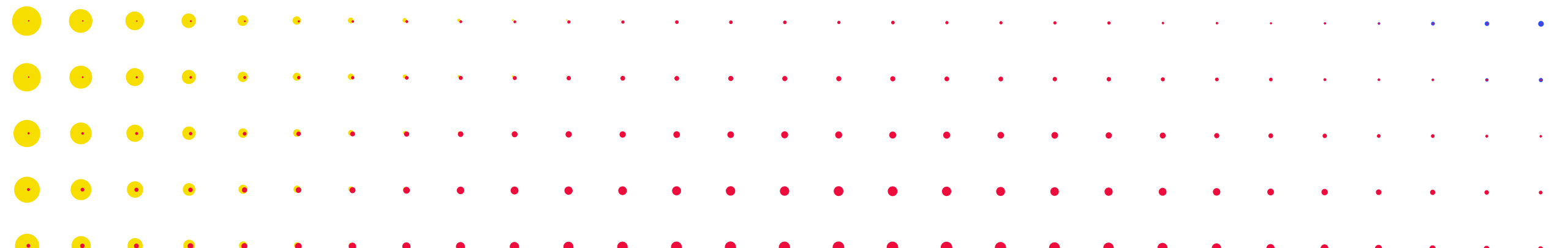
26 April 2023

Content

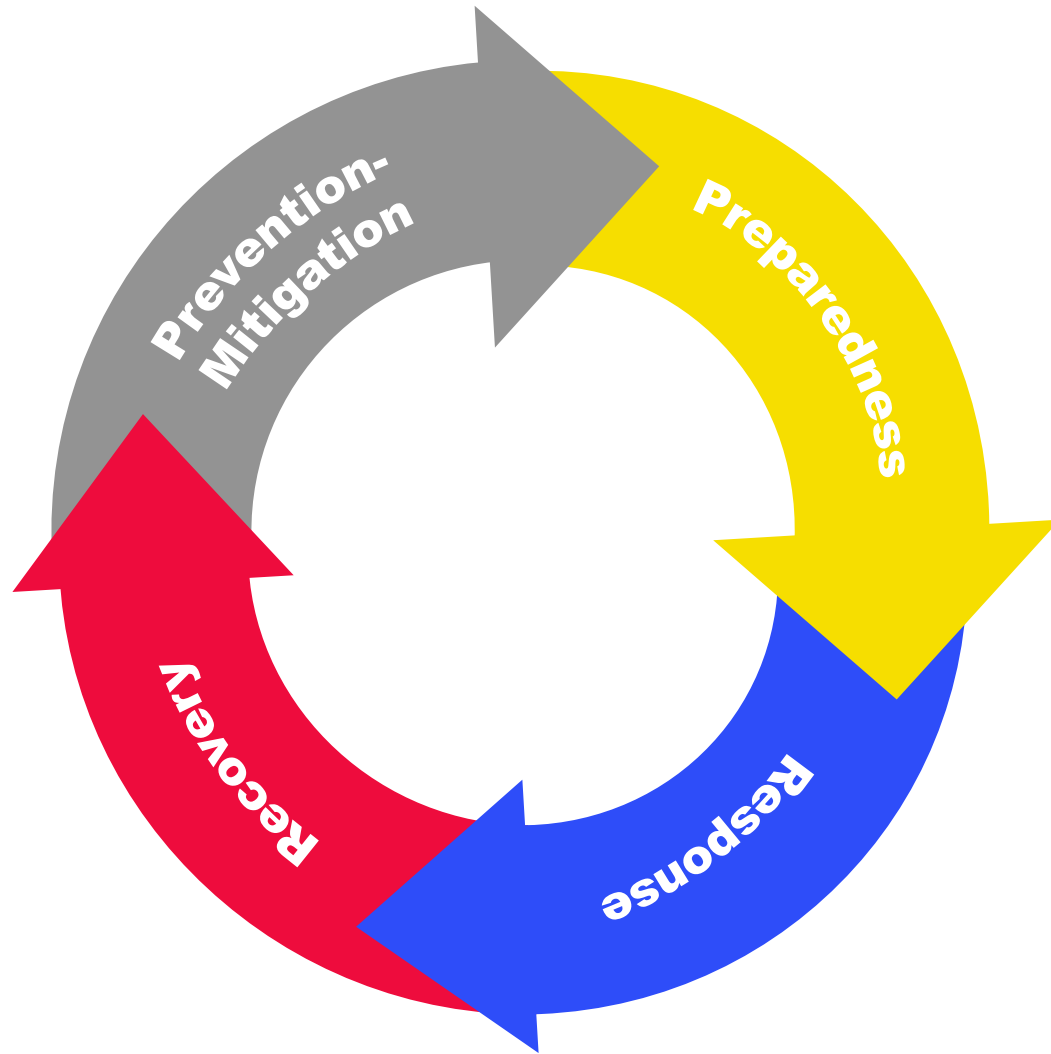| Topic		Presenter	Time
1	**Introduction**	David Traynor Senior Technical Coordinator, Community Rights and Gender	*3 minutes*
2	**The shift to pandemic preparedness**	Shunsuke Mabuchi Head of RSSH and PPR, Technical Advice and Partnerships Department	*20 minutes*
3	**C19RM Technical Information Note and additional guidance**		
4	**C19RM funding opportunities**	Jacqueline Bataringaya Senior Manager, C19RM Secretariat	*10 minutes*
5	**How and when to engage**	Olive Mumba Advisor, Community Rights and Gender Raine Cortes Senior Program Officer, Community Rights and Gender	*15 minutes*
6	**Q&A**		*25 minutes*

2 The shift to pandemic preparedness

Cliquez sur "Interprétation" pour le français. | Haga clic en "Interpretación" para español. | Clique na interpretação para português.

Transition from COVID-19 Response to Recovery, Prevention and Preparedness

COVID-19
COVID-19 control and containment interventions.

TRANSITION PLANNING
Increased focus on integration of key response functions, and health systems' resilience and pandemic preparedness has been consistently emphasized.

PREPAREDNESS
Health and community systems and pandemic preparedness programmatic priorities.

Overview: COVID-19 Response Mechanism (C19RM)

C19RM was designed as a funding stream to cover three main areas of investment.

1. reinforcing the COVID-19 response.
2. mitigation of the impact of COVID-19 on HIV, TB, and malaria programs
3. urgent improvement to health and community systems.

C19RM remains flexible and agile given uncertainties about pandemic evolution.

Country priorities have shifted from acute pandemic response to strengthening systems for health and pandemic preparedness, and recovery of HIV, TB and malaria programs.

3 C19RM Technical Information Note
and additional guidance

Shift in countries needs informed C19RM guidance and priority areas for health and community systems and pandemic preparedness priorities
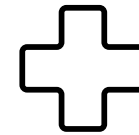
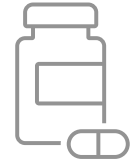**Surveillance system strengthening**

Laboratory and diagnostics

Human resources for health and community system strengthening

Medical oxygen, respiratory care and therapeutics

Health product and waste management systems

HIV, TB and malaria COVID-19 mitigation measures are no longer a priority. Adaptations that remain relevant should be integrated into regular GC7 grants.

Human Resources for Health and Community Systems Strengthening

The Global Fund's HRH investments support

- Optimization of the health workforce to ensure equitable access to and scale up integrated, people-centered health services.
- Improvement of HRH performance and quality of care via evidence-based innovative interventions.
- Strengthening of PHC and community level integrated service delivery, and pandemic preparedness.

Critical approaches for investing in HRH

- More effective interventions to improve HRH performance.
- Catalytic support for integrated HRH strategic planning supporting country workforce development, including CHWs.
- Enhance system readiness to scale CHWs aligned with WHO guidance.

Intervention areas for HRH and Quality of Care

- HRH planning, management and governance, including CHWs.
- Education and production of new health workers, excluding CHWs.
- Remuneration and deployment of existing/new staff (non-CHWs).
- In-service training, excluding community health workers.
- Integrated supportive supervision for health workers (non-CHWs).
- Quality improvement and capacity building for quality of care.
- Community health workers: selection, pre-service training, certification.
- Community health workers: contracting, remuneration and retention.
- Community health workers: In-service training.
- Community health workers: Integrated supportive supervision.
- CSS: Community capacity building and leadership development
- CSS: Community-led monitoring
- CSS: Community-led advocacy and research
- CSS: Community engagement, linkages and coordination

Key Considerations in Pandemic Preparedness and Response

Key principles to guide the convening, consultation and integrated planning for technically robust, operationally and financially aligned pandemic preparedness funding requests:

1 Strengthen pandemic preparedness through implementation of the International Health Regulations.

2 Finance pandemic preparedness national strategies and work in partnership with National Public Health Institutes, or equivalent governance bodies.

3 Employ standardized, tested pandemic preparedness strategies and monitoring tools, tailored to the country context.

4 Build on systems developed during COVID-19 and other public health emergencies.

5 Consider One Health approaches entailing multi-sectoral engagement e.g., animal, environment.

6 Support complementary frontline capabilities, including human resources, at the primary health care and community levels.

7 Adapt, modify and/or extend CCM governance model to support the effective coordination, planning and oversight of pandemic preparedness programs.
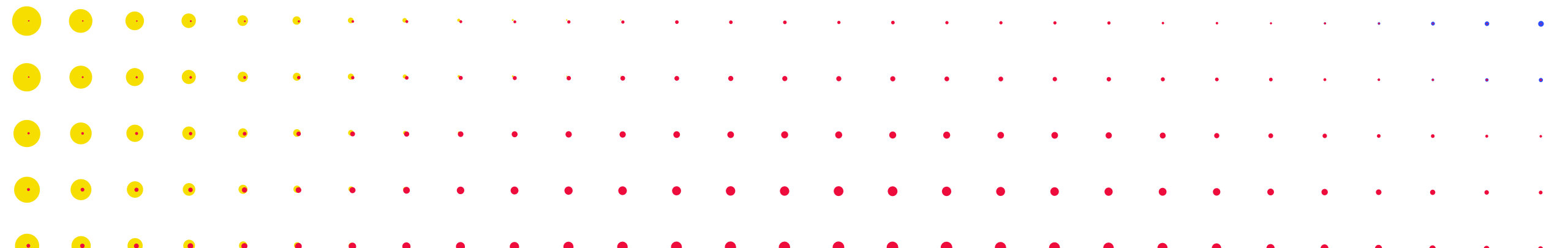
8 Effective response requires community trust and pandemic preparedness investments should focus on building trust through holistic and continuous community engagement.
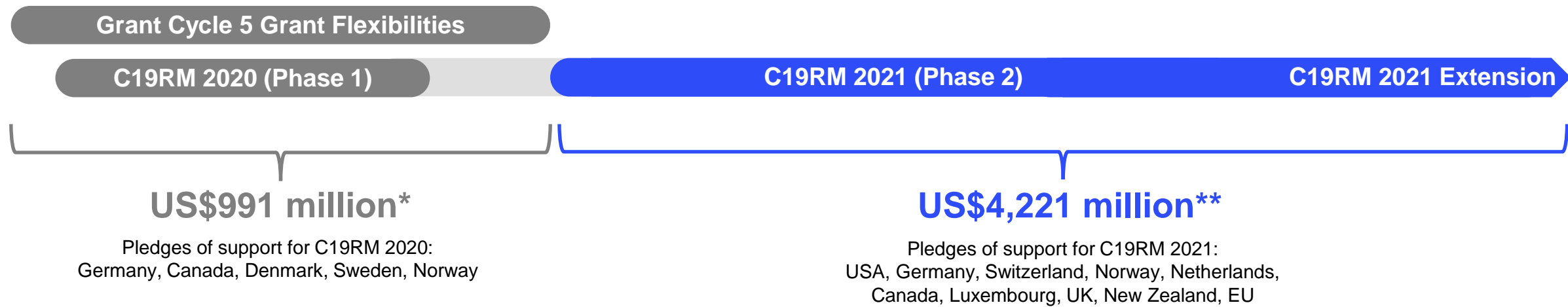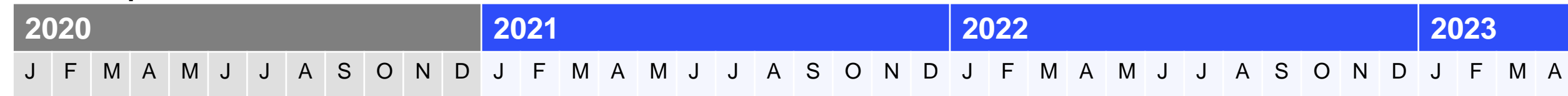
4 C19RM funding opportunities

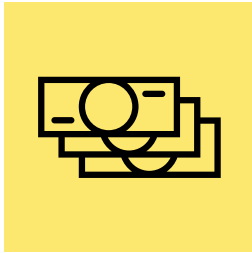# COVID-19 Response Mechanism: US$5 billion invested across three modalities

2020	2021	2022	2023
J F M A M J J A S O N D	J F M A M J J A S O N D	J F M A M J J A S O N D	J F M A

Grant Cycle 5 Grant Flexibilities

C19RM 2020 (Phase 1) | **C19RM 2021 (Phase 2)** | **C19RM 2021 Extension**

US$991 million*

Pledges of support for C19RM 2020:
Germany, Canada, Denmark, Sweden, Norway

US$4,221 million**

Pledges of support for C19RM 2021:
USA, Germany, Switzerland, Norway, Netherlands,
Canada, Luxembourg, UK, New Zealand, EU

Data availability

Grant Flexibilities	**Awards per country (grant)**
C19RM 2020	**Awards per country, board priority area and focused health products (Dx, PPE)**
C19RM 2021	**Awards per country, board priority area, intervention (strategic priority) and detailed health products**

*US$232 million grant flexibilities & US$759 million C19RM Funds   ***A portion of this amount has also been invested in CMLI and OPEX*

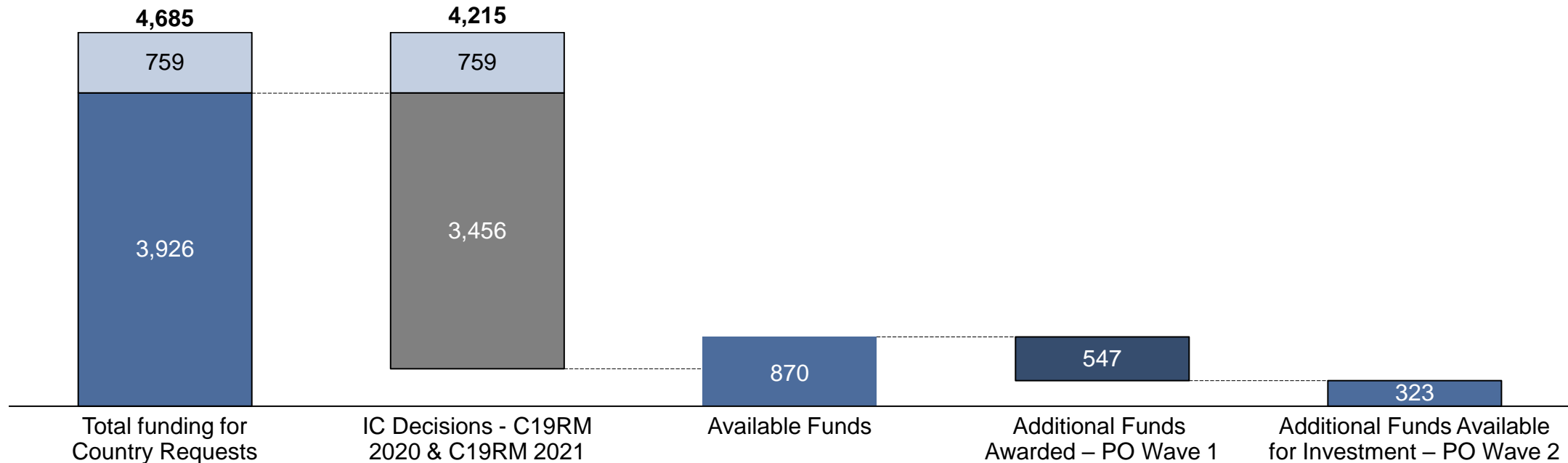# COVID-19 Response Mechanism - Awards Pipeline

US$4,762 million of C19RM cumulative funding awarded to **125 applicants.**

The Board acknowledged evolution of the COVID-19 pandemic and corresponding shift in country funding priorities towards longer-term investments in health systems' infrastructure and capacities for pandemic preparedness and response.

The Board approved that any C19RM funds may be implemented through **31 December 2025**, noting the need to ensure rapid deployment of funds, maximize impact and use of funds.

C19RM 2020 & C19RM 2021 Funds Awarded (US$ million)

	4,685		**4,215**			
	759		759			
	3,926		3,456			
				870	547	323
	Total funding for Country Requests		IC Decisions - C19RM 2020 & C19RM 2021	Available Funds	Additional Funds Awarded – PO Wave 1	Additional Funds Available for Investment – PO Wave 2

Legend:
- ☐ C19RM 2020
- ☐ C19RM 2021
- ■ C19RM Portfolio Optimization
- ■ C19RM 2021 Previous awards
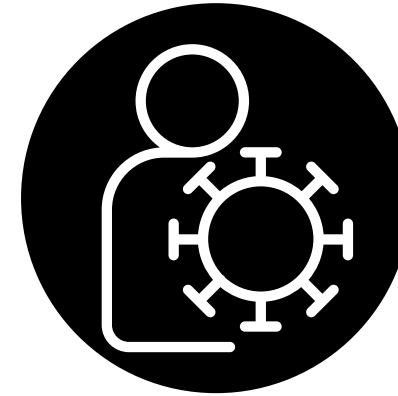
(data as of 17 February 2023)

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C19RM Funding Opportunities

To execute the strategic shift, the Global Fund is extending C19RM funding use until end of 2025, launching an additional wave of funding, and aligning with its core GC7 grants.
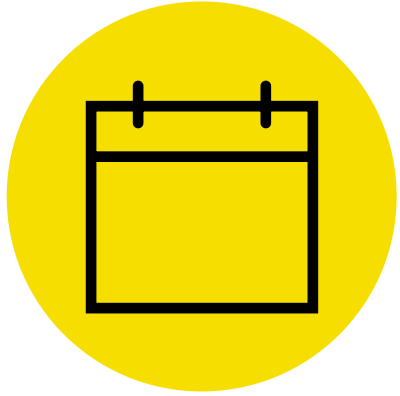

C19RM funding awards have been extended to 30 June 2023. Countries can continue to **implement C19RM-funded activities until 31 December 2025**.

C19RM Portfolio Optimization (PO) Wave 2 facilitates the shift towards longer term strengthening of RSSH and pandemic preparedness aligned to Grant Cycle 7 investments.

- C19RM does not provide country allocations as in regular grants. Eligible applicants submit proposals.

- Eligible Global Fund countries can apply for C19RM funding and only those requests that fulfill the screening criteria will be reviewed and considered for funding.

- Quality funding requests that do not get funded will be registered as "unfunded quality demand" in case of additional funding becoming available.

C19RM Portfolio Optimization Wave 2 - timelines

Updated deadline: 12 May 2023

This updated timeline supports better coordination of funding streams and support timely awards and implementation through:

- Increased complementarity with GC7 applications.

- Integration and coordination with Pandemic Fund (proposals due 19 May)

- Defining programmatic gaps and maximizing potential for countries to develop proposals to register Unfunded Demand for future additional funding opportunities – including Pandemic Fund and C19RM.

- Analysis of budgets, prioritization, reinvestments / re-budgeting, and preparation of Performance Frameworks.

- Resource mapping across national, regional and global funding mechanisms

The Global Fund Secretariat will **review and approve C19RM applications on a rolling basis until the end of May** to ensure rapid deployment of funds, maximize implementation time and optimize fund utilization through 31 December 2025.

CCM Coordination & Engagement

CCM Funding

Additional CCM funding (up to 25% of CCM's annual budget and subject to need) available, to support engagement of key stakeholders/communities and coordinate with national COVID-19 response bodies or equivalent bodies for RSSH and pandemic preparedness.

Other portfolio optimization waves will potentially continue after June 2023.

! **New endorsement requirements:** In addition to endorsement by CCM, endorsement by the **national epidemic and pandemic preparedness coordinating body** + Ministry of Health and Ministry of Finance

Using the Global Fund as an Implementing Entity
Coordination and integration into existing operations.

- The Global Fund is one of the 13 approved entities for the Pandemic Fund's first call for Proposals.

- A streamlined and integrated funding request (C19RM and Pandemic Fund) allows Countries to indicate in their funding request (first page) whether they are interested in having unfunded needs from their proposal considered as part of a proposal from the Global Fund to the Pandemic Fund.

- The funding request design ensures essential information is provided with no additional burdens generated or need for more information to be provided by the country to be considered.

- Countries may opt to be considered for the Global Fund proposal to the Pandemic Fund without applying for C19RM PO wave 2.

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Additional Funding Request Form
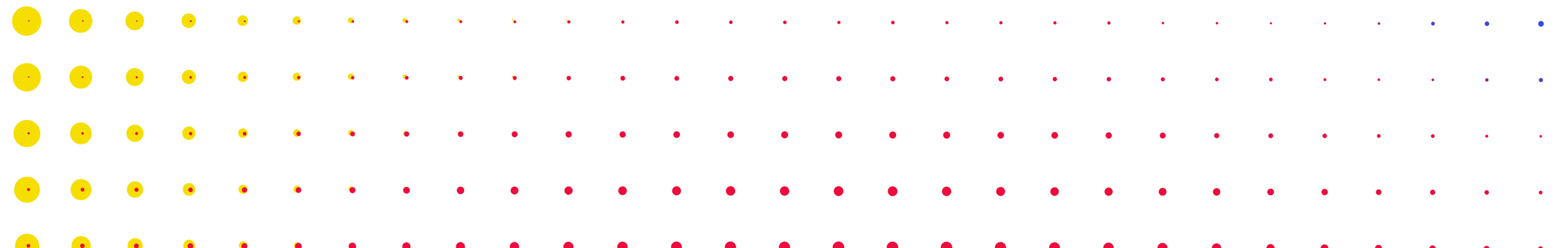
Date Created: 20 March 2023

Pandemic Fund interest.
To be considered for the Pandemic Fund, funding requests must cover one or more of the three priority areas of the Pandemic Fund's first Call for Proposals (surveillance, laboratory systems, or human resources/workforce strengthening)

[Please indicate (Yes or No) whether the applicant would like to also be considered for funding through the Pandemic Fund with the Global Fund as an Implementing Entity. Approved, unfunded demand from this C19RM Additional Funding Request may be considered as part of a proposal from the Global Fund to the Pandemic Fund.]

4 How and when to engage

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Why engage?

- In-country partners are encouraged to **build on health systems developed during COVID-19** and other public health emergencies to strengthen medium to longer-term preparedness.

- C19RM has shifted towards **strengthening systems for health and pandemic preparedness**.

Effective response requires **building community trust** and pandemic preparedness investments through holistic community engagement, including:
  - Encouraging proactive gender equity-based solutions, as pandemic responses often exacerbate gender inequalities and should address in pandemic preparedness strategic and operational plans.
  - Addressing barriers to health services.
  - Solving human rights and gender-related barriers and inequities that limit access to PHC services, including at community level.

Strengthened pandemic preparedness can only be achieved by including communities in country governance structures and processes, planning, direct implementation and oversight roles.

Community engagement is encouraged in national and sub-national decision-making bodies to support health systems strengthening and pandemic preparedness and response.

Changes in consideration

1 | **Data from communities** to inform C19RM funding request, detailing how funding will be used to respond to supporting and building strong community systems in preparation for the next pandemic, which has secondary effects now in the current epidemics the impact of COVID-19 or (prepare for future pandemics) on Key Populations, GBV, and human rights issues and **list explicitly populations most and disproportionally impacted**.

2 | CCMs should ensure PRs have **civil society or Community-based implementers as service providers** that are best placed **to respond to the urgent needs of communities.**

3 | Additionally, a list of concrete examples of **Community Rights and Gender-related activities** prepare for future pandemics to be used as a tool to help generate new ideas in CCM discussions.

4 | All **consultations must be documented and included in the C19RM funding request** submission, including capturing a list of community and civil society members' suggestions for funding, even if these are not prioritized in the final, submitted budget. This information will be used by the Global Fund to assess applications and to give a fuller picture of community engagement and needs.

5 | The design should demonstrate **complementarity with civil society representatives' input into GC7** funding requests.

CCM community engagement

CCM funding

- ***25% uplift in CCM's funding*** *amount, to support increased engagement with civil society and communities and other relevant stakeholders*

Eligibility requirements

- Coordinate the development of all funding requests through **transparent and documented processes** that engage a broad range of stakeholders, including CCM members and non-members, in the solicitation and the review of activities to be included in the funding request; and
- Clearly document efforts to **engage Key Populations** in the development of funding requests – **Community priority Annex**

Other stakeholders

- Maximum **engagement with all stakeholders on the CCM**, particularly with civil society members;
- Reach out to **non-CCM members**, such as community populations severely impacted by the pandemic; and
- Effective **alignment and coordination with the national COVID-19/PPR response bodies**, **equivalent bodies** for HIV, TB and malaria programs, RSSH and pandemic preparedness (as relevant) and with other bilateral and multilateral partners supporting in the country.

Community systems strengthening – Community led and based organizations

Community systems strengthening (CSS)

- Community capacity building and leadership development
- Community-led monitoring
- Community-led advocacy and research
- Community engagement, linkages and coordination

Gender-based violence to strengthen health systems and capacities if/when a new pandemic occurs:

- Strengthen systems that report, respond and protect communities against GBV and IPV
- Based within communities with linkages/referrals to health centers
- Emergency planning systems to maintain service access for marginalized and/or criminalized communities,

Community-led monitoring for Pandemic Preparedness:

- Strengthen community led monitoring system capacities to adapt and respond to disease outbreaks; monitor human rights and gender related impacts.
- Strengthen health policy, resource decisions, and/or complaint and grievance mechanisms.
- System capacities to assess and mitigate for potential human rights, health equity and gender related implications

! The intervention areas highlighted here are specific to system capacities and capabilities for community led and based organizations. Critical to note that gender and human rights related aspects of pandemic preparedness must be consider across all relevant system domains. For example – integrating into HRH/CHW training capacities on GBV and stigma and discrimination. Development of IPC strategies that are inclusive and respond to the needs of all health workers including peer outreach etc.

Examples of CLM interventions in the context of COVID-19

ITPC Emergency CLM model for COVID-19 in five countries

(China, Guatemala, India, Nepal and Sierra Leone)

Adaptations includes:
- Rapid implementation through transparent and inclusive processes.
- Maximizing the use of digital tools and technology for data collection and analysis
- Expanding indicators to include new infections
- Support advocacy for quality, accessible and acceptable services

Global Fund supported regional treatment observatory in West and Central Africa contributed to the following outcomes in first 2 years of implementation

In Sierra Leone:

CLM data from September to November 2020 showed how GeneXpert machines were being overwhelmed by COVID-19 testing and significant stockouts of TB drugs.
- **RESULT: Advocacy with DHMTs through NTP to step up monitoring of drug supply, free duty waivers for essential TB commodities at port of clearance.**

Age-disaggregated data from CLM revealed that one third of people on ART who were LTFU were young people.
- **RESULT: Adolescents lost to follow-up strategy created to retain them using text messaging and other social media platforms to track and trace LTFU and bring them into care.**

Viral load suppression improved from 48% to 77% across 11 countries in less than two years of CLM implementation.[1]

In Kenya, advocates used CLM to collect evidence on barriers to accessing health services, and successfully referred 757 cases for legal support to a network of pro bono lawyers or to the HIV Tribunal.[2]

In the Democratic Republic of the Congo, TB medication stock-outs were drastically reduced from 95% at the beginning of 2019 to 5% in December 2019, thanks to a CLM Observatory on the Quality of Care for HIV/TB.

Results from C19RM CLM short-term TAs (2022-2023)

C19RM CLM CMLI: On-demand short-term technical assistance for setting-up CLM mechanisms, systems strengthening and adaptions to C19, and support CLM implementation in C19RM grants. Provided 22 TA support in 13 countries to date.

Country	Results and TA deliverables
Moldova	• Developed questionnaire to identify barriers and service access for KAPs on COVID-19; adapting an electronic registry for monitoring HIV services, COVID-19 vaccination and treatment services for KAPs: **https://scorecard-hiv.md/**
Kenya	• Analysis of existing CLM data set for key trends (pre-COVID vs. COVID-era) and preliminary recommendations for strengthened/new indicators • Developed CLM performance indicators for C19RM grant, and data analysis and reporting framework; CLM i-monitor and national CLM framework adopted
India	• Developed data collection tool to track stock-out of ARVs due to COVID-19 disruptions; local community data reported back to NACO
Tanzania	• Developed CLM framework with COVID-19 indicators to be included in community TB data collection tool
Liberia	• Ongoing TA on developing CLM data collection tools, training for CLM implementation team – in preparation for the CLM pilot under C19RM grant

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Value of CLM in community systems strengthening and pandemic preparedness

- COVID-19 has highlighted the **crucial role and value of engaging communities on the ground** in C19 (and other epidemic/pandemic) surveillance and/or monitoring and response.
  - Understanding the **impact of any epidemic/pandemic on availability, accessibility, acceptability and quality (AAAQ) of essential HIV, TB and malaria services** from the client's perspective.
  - Monitoring, assessing and mitigating potential **human rights, health equity and gender-related impact and implications**

- It is important to strengthen community systems for pandemic preparedness, by **establishing and investing in community-led mechanisms and interventions,** as they have direct access to communities / clients of HTM services most affected.

- Existing CLM mechanisms/systems in place (initially in response to disruptions due to C19) can be **reviewed, improved and adapted to be aligned and institutionalized** within national epidemic/pandemic preparedness programs/plans (initially started as C19 response programs/structures).

- Communities (through dialogues/consultations, CCMs and other governing bodies) can **advocate for CLM inclusion, funding and strengthening in C19RM PO Wave 2 and GC7 funding requests**. Various resource/guides on CLM are available online.
  - There should be **complementarity of resources for CLM in both C19RM and GC7 grants** and strategic planning towards CLM sustainability and domestic funding.
  - Currently, CRG is offering **short-term CLM technical assistance (TA)** to countries to support setting-up, adaptation, strengthening, and implementation of **CLM programs funded in C19RM grants**, and aligned with pandemic preparedness strategies (until 2025).

Reference Documents and Support

1. **C19RM Modular Framework** - includes list of interventions and sub-set of indicators required for grant PF

2. **C19RM Indictor Guidance Sheets** - includes indicator description and measurement guidance on indicators in the MF – link forthcoming

3. **C19RM M&E Framework** - includes full list of indicators that will be used for tracking progress and reporting on C19RM investments. It includes financial, procurement and programmatic indicators across all 22 interventions.

4. **C19RM Technical Information Note** - describes the new focus on health system resilience and related pandemic preparedness interventions and related activities that could be supported by GF grants during C19RM extension period.

5. **Overall guidance on operationalizing C19RM extension** is available on Global Fund Website.

Community Systems Strengthening and Community-led Monitoring Resources

Community Engagement: A Guide to Opportunities Throughout the Grant Life Cycle

Technical Brief on Community Systems Strengthening

Decision-making Guide for Community Systems Strengthening Interventions in Global Fund Grants

Technical Brief on Gender Equality

Guide to support inclusion of CLM in funding requests to the Global Fund (IAS, 2022)

Integrating Community-led Monitoring (CLM) into C19RM Funding Requests

Community Led Monitoring Hub: various CLM resources/guides developed by ITPC Global

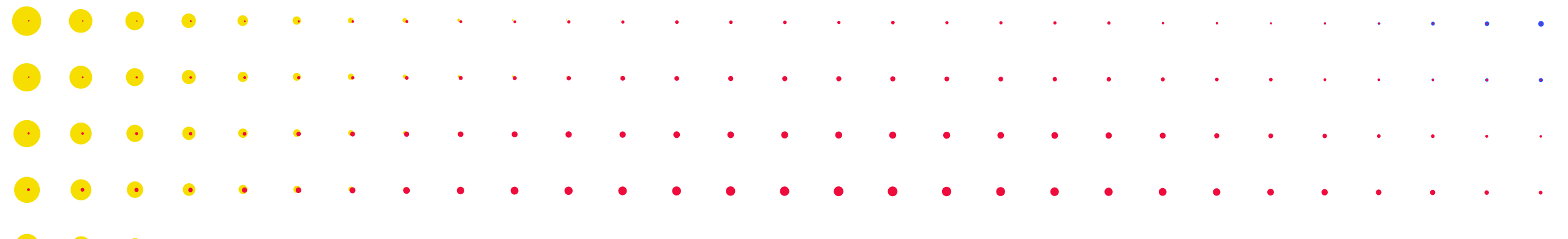Health GAP CLM Resources: various CLM resources/guides developed by CLAW consortium
- How to budget for community-led monitoring

5 **Q&A**

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Thank you!
Merci !
¡Gracias!
Obrigado!

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The Global Fund to Fight
AIDS, Tuberculosis and Malaria

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