

**KCM OVERSIGHT COMMITTEE MEETING HELD ON 1ST SEPTEMBER, 2016
MATTERS ARISING & UPDATES ON PREVIOUS ACTION POINTS**

Action Point	Update as at November, 2016
National Treasury TB Grant	
1. Procurement status for the two motor vehicles under counterpart financing	<ul style="list-style-type: none"> • Approval for procurement submitted to KEMSA. • The vehicles to be replaced are specified and needs direct purchase from TOYOTA. Such procurement as per government regulations requires that KEMSA use a negotiated contract from public works. • KEMSA is in the process of updating the contracts and specifications.
2. Progress in renovation/construction of the KEMSA warehouse	<ul style="list-style-type: none"> • Land to construct the warehouse has been acquired. • Work on the project is expected to begin in November 2016 with a consultancy to determine the BQs and the construction is expected to begin in January 2017.
3. Disposal of streptomycin (340,100 vials) at KEMSA stores	<ul style="list-style-type: none"> • The TB programme is working with relevant authorities to find use of the medicine other than TB treatment and make it available to be used elsewhere. • The TB program has tried to donate to countries that may still be using but have not gotten any interest.
4. Assessment of utilization of Gene Xpert technology and sustainability	<ul style="list-style-type: none"> • Assessment planned, survey road map /protocol circulated to KCM &OC members on 14.11.2016.
5. Status of procurement and payment of TB commodities	<ul style="list-style-type: none"> • KEMSA has received most of the first line anti TBs and the process of payment has begun. The delivery of paediatric medicine was moved to next year based on the advice of the GDF mission.
6. Ensure that as the repatriation of refugees in Dadaab is ongoing, safety, human rights and public health issues are considered for patients currently receiving MDR support.	<ul style="list-style-type: none"> • All the MDR-TB patients are still on treatment at Daadab. There has been no repatriation. • The TB program continues to provide support for 71 patients with related drugs, lab tests and social support. • The good news is that only 2 new patients have been enrolled this year in the Daadab facility because of the functional treatment centre in Mogadishu which has enrolled 107 patients by end of October 2016. • MDR Patient schedule showing when the patients enrolled at Daadab are expected to complete their treatment circulated to KCM /OC members on 14.11.2016.
7. Progress made in operationalization of KNH MDR Isolation facility Number of patients who have used the KNH facility in October 2016	<ul style="list-style-type: none"> • KNH MDR Isolation Facility operational since October, 2016. • 11 patients have benefited from the facility since October 2016.

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National Treasury HIV Grant	
<p>1. COMBO</p>	<ul style="list-style-type: none"> • Baseline assessment undertaken by NASCOP and NACC • Information gathering including county visits on current response completed • Modeling for epidemic analysis and impact scenario building ongoing • Mapping of response to epidemic is ongoing • Draft report and presentation to the TWG conducted on 28th October 2016 • Final report writing and county work plan development is planned for November 2016 • Next step: Gap analysis and prioritization of interventions for implementation planned for November/ December 2016 • Implementation planned for quarter 3 2017.
<p>2. Procurement status for HIV commodities</p>	<p>Procurements_2014/2015 & 2015/2016</p> <ul style="list-style-type: none"> • ARVs –NVP suspension – delivered payment in progress; 3TC 150mg – deliveries was expected in October, 2016 and balance in February, 2017; Ritonavir liquid & 3rd line medicines (RAL, DAR, ETV, RTV 100mg) – deliveries in progress • CD4 –Calibur - TruTest Kit CD3/CD45 partially delivered – Balance on hold to avoid expiry. Payment amounting 1.7m for delivered quantities to be processed for payment. • EID – at quotation stage – Roche local agent Science scope rejected the offer due to decline in quantities. Roche has resubmitted revised quotation. • Blood safety – Terminated item (HIV Screening Test & Hepatitis B HBs Version 4.0) procured and delivered. Payment in progress at PR • Condoms – Contract of 2015/2016 amounting to USD 2,800,946.35 awaiting delivery • Voluntary Medical Male Circumcision (VMMC) – awaiting delivery
<p>3. Progress realized in Procurement of motorboat for Homabay County.</p>	<ul style="list-style-type: none"> • Justification on the need to have the motor boat at Homa bay has done and discussions are underway

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<p>4. Renovation of County & SC stores:</p>	<ul style="list-style-type: none"> • Team/secretariat Appointed to coordinate the process of renovations at national level (NAS COP, TB , Malaria, Public Works; MOH Legal Officer) • Counties to identify a minimum of 10 potential contractors <p>Current status</p> <ul style="list-style-type: none"> • 17 counties submitted tender documents (BQs and structural drawings) and given feedback-Kirinyaga, Nyandarua, Kiambu, Kilifi, Makueni, Kisii, Trans Nzoia, West Pokot, Kajiado, Tharaka Nithi, Busia, Siaya, Nandi, Kisumu, Elgeyo Marakwet, Machakos, Laikipia. The 17 counties have been requested to submit 10 contractors. • 12 counties (Baringo, Bomet, Bungoma, Isiolo, Kwale, Tana River, Garissa, Mandera, Taita Taveta, Samburu, Wajir and Nyamira) are on their final stages of re-evaluation of the tender documents. • 3 counties (Kakamega, Nyeri and Vihiga) yet to send revised documents after evaluation in September 2016. Communication on the evaluation has already been sent to them. • 15 counties have never sent their revised tender documents since November 2015 (Embu, Homabay, Kericho, Kitui, Lamu, Marsabit, Meru, Mombasa, Muranga, Nairobi, Nakuru, Narok, Turkana, Uasin Gishu and Migori) Follow up is being done these remaining counties
<p>5. Progress made in submission of a reallocation request for savings realized</p>	<ul style="list-style-type: none"> • Savings will be used to procure ABC/3TC 120/60mg; 2017/2018 ARVs • Disseminate the 2016 ART guidelines and the differentiated care handbook.
<p>6. Roll out tools to capture precisely the Percentage of HIV-positive clients screened for TB in HIV care or treatment settings.</p>	<ul style="list-style-type: none"> • Pilot done in Rangwe sub-county and Alego sub-counties of Homabay and Siaya counties respectively. • The sub-counties are reporting in DHIS using the new tools. • Roll out of the tools has commenced to the rest of the counties where county teams and implementing partners have been trained on the same. • Cascade trainings to the health facilities on going and expected to be completed by December 2016. • All health facilities are expected to start reporting using the new tools in January 2016.

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National Treasury Malaria	
<ul style="list-style-type: none"> • NT and NMCP to establish and provide details to KCM on the list of facilities and Counties(29%) that have challenges in submitting timely reports • NT & NMCP to share with KCM the outcome of review meetings with Counties & strategies to improve data quality and reporting rates. <p>KCM to engage with counties on reporting rates challenges that are impacting negatively on Grant performance.</p>	<ul style="list-style-type: none"> • NMCP conducted the review meeting with counties in the month of July 2016. Strategies to improve on reporting rates and data quality were discussed. • County review meeting full report and list of Counties that have challenges in reporting was circulated to KCM on 28.09.2016. • The next County review meeting is scheduled for February 2017. • Challenges in submission of reports by Counties to be discussed with Counties during Oversight Visit in Kitui and Kwale County.
KRCS	
<p>7. KRCS to engage stakeholders and MSMs and ensure that all MSM clients uptake STI Screening services</p>	<ul style="list-style-type: none"> • Engagement Ongoing ,86% i.e. 6,689 MSMs out of 7,758 where reached by HIV/AIDS prevention programs during July to September, 2016
<p>8. KRCS to work closely and provide a report on other partners distributing health products and equipments in Counties to ensure that there is no duplication.</p>	<ul style="list-style-type: none"> • KRCS has been working closely with Ministry of health, County governments and partners in analyzing HPE situation and setting priorities. All the health products and equipments supplied in counties are as per the priority list submitted by counties. • Distribution schedule/invitation to participate in flag off circulated to KCM members on 21st September, 2016
AMREF.HA TB GRANT	
<ul style="list-style-type: none"> • Submit the assets deposition plan to KCM through TB ICC. • AMREF.HA to provide a brief /report on the development of CSS curriculum and share with KCM & CSS TWG • KRCS to provide a status report within two weeks on MDR support in Dadaab Camp to AMREF.HA/KCM • TB ICC, AMREF.HA & KRCS to agree on the most efficient system to use in payment of MDR support to Clients in Dadaab Camp. 	<ul style="list-style-type: none"> • The Assets deposition plan has been finalized, presented to TB ICC on 23/11/2016 & Oversight Committee on 24.11.2016. To be approved by KCM on 8.12.2016. • CSS integrated modules and tools finalized, training of 21 CHEWS and 320 CHVs ongoing. Road Map shared with OC/KCM members. • The Pending monthly reports for April, May and June 2016 were submitted to AMREF HA. • TIBU System to be used in payment of MDR support to clients a migration from MPESA payment.

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<p>Min 6/1/9/2016</p> <p>1. Endorsement of a reconstituted Oversight Committee, as recommended during EPA/PIP. In this regard, Ms Timpiyan Leseni – (Alternate TB constituency) was nominated to the sit in the committee’s slot for people infected/affected by disease communities, Dr Rudi Eggers to represent ML-WHO, while, Dr Evans Amukoye-KEMRI. The committee is still expecting to receive a nominee from the Key Affected Population.</p>	<ul style="list-style-type: none"> • KCM endorsed the reconstituted Oversight Committee membership and communication made to Global Fund on 29.09.2016. OC meeting highlights and Q1 report FY 2016/2017 also sent to Global Fund Secretariat on 29.09.2016. • The Key Affected Population to provide an update of their nominee during the KCM meeting on 8.12.2016
<p>Min 6/1/9/2016</p> <p>2. Oversight Visit to Kisii and Kitui Counties</p>	<ul style="list-style-type: none"> • Successfully held on 7th to 11th November, 2016 in Kisii and Kitui Counties • Draft report circulated to Counties and presented to Oversight Committee meeting on 24.11.2016. • Final draft to be presented to KCM meeting on 8.12.2016