# MINUTES OF THE KENYA COORDINATING MECHANISM MEETING HELD ON $14^{\rm TH}$ MARCH, 2019, IN THE $6^{\rm TH}$ FLOOR NACC BOARDROOM

### Present

KCM Chair 1. Ms. Susan Mochache PLWD/KeNAAM 2. Mr. Edward Mwangi Govt/ NACC 3. Dr. Nduku Kilonzo Private Sector/Formal 4. Dr. Jacqueline Kitulu DP/ML 5. Dr. Jantine Jacobi 6. Dr. Pierre-Yves Bello DP/BL DP/BL 7. Mr. John Bernon 8. Mr. Meschack Ndolo Council of Governors Council of Governors 9. Ms. Meboh Abuor **Key Population** 10. Mr. Peter Njane PLWD/TB 11. Ms. Lucy Chesire 12. Ms. Zilpah Samoei FBO/CHAK AYP 13. Ms. Gloria Kerubo 14. Mr. Taib Abdulrahman KP KCM Coordinator 15. Mr. Samuel Muia

### In Attendance

Head/Strategic Programs/MOH 1. Dr. Joseph Sitienei LFA/PWC 2. Mr. Francis Muriu NASCOP 3. Dr. Kigen Bartilol 4. Dr. Waqo Ejersa **NMCP** NASCOP 5. Dr. Kigen Bartilol Head/TB Program 6. Dr. Maureen Kamene PR/National Treasury 7. Dr. Peter Kimuu **KEMSA** 8. Mr. John Kabuchi PR/National Treasury 9. Mr. Stephen Muiruri PR/Kenya Red Cross 10. Ms. Emily Muga PR/AMREF 11. Mr. Benson Ulo Chair/HIV SR Selection Chair 12. Ms. Rose Kaberia **UNAIDS** 13. Dr. Caroline Olwande PA/PS 14. Dr. Isaac Kimani KCM Secretariat 15. Christine Awuor KCM Secretariat 16. Margaret Mundia

### Absent with Apology

Ms. Faith Mwende
 Jane Wamoko
 Dr. Bernard Ogutu
 NGOs
 The National Treasury
 Govt/KEMRI

## **Absent Without Apology**

1. Dr. Jane Masiga

2. Dr. Rudi Eggers

3. Mr. Nelson Otwoma

4. Mr. Jackson Mwangi

FBO/MEDS DP/ML

PLWD/NEPHAK

Government/Ministry of Devolution

### Agenda

- 1. Opening Remarks
- 2. Apologies
- 3. Declaration of Conflict of Interest
- 4. Confirmation of Minutes dated 6th December, 2018
- 5. SR Selection Report
- 6. Oversight Committee Reports
- 7. Management Commttee Report
- 8. Appeals Committee Report
- 9. A.O.B

Min 1/1/3/2019 - Opening Remarks

The incoming KCM Chair thanked members for welcoming her. She informed members that the Director NACC and KCM Secretariat had briefed her on Global Fund, and she was glad

## Min. 2/1/3/2019 – Apologies

The Coordinator presented to the meeting apologies from Members as listed above.

## Min. 3/1/3/2019 - Conflict of Interest

None was declared

# Min. 4/1/3/2019 - Confirmation of Minutes Dated 6th December, 2018 and Matters Arising

The Minutes of the KCM Meeting held on 7th December, 2018 were presented and confirmed as a true record of the day's proceedings.

Proposed By:

Seconded By:

### **MATTERS ARISING**

Status on Matters Arising and status update was presented by the Secretariat, of which most had been addressed. The outstanding matters included, under the Oversight Committee Report presented to the KCM meeting of 7th December, Fast tracking completion and utilization of funds allocated for KEMSA Warehouse Construction. The construction was ongoing and USD 4.4M from the now closed old grant had been utilized, while the balance of USD 5.1M was to be obligated from the new grant portfolio. However, Tax Waivers continue to pose a challenge.

process of Self-Assessment by counties. The CT is to update the KCM on progress so far and the Roadmap.

# Min. 5/1/3/2019- Review and Approval of Appeals Committee Report (TB & HIV SR Selection)

The process of selecting SRs to implement the Jan 2018 to June, 2021 Grant has been ongoing, as well as implementation of some of the interventions. The Selection process done by the PRs has been occasioned by Appeals on decisions reached, by some interested organizations. This necessitated the KCM to set up an Appeals Committee, with clear terms of reference, incorporating expertise in Supply Chain Management as well as Legal issues. The Committee, in November 2018, reviewed 2 Rounds of appeals, and on March 4<sup>th</sup> 2019 reviewed others which where categorized as Appeals Round 3 (Public, Private Mix & 4: Kenya Innovative Challenge Fund).

In the current Appeals Review, 21 (16 for Kenya Innovative Challenge Fund, and 5 for Public Private Mix) applicants submitted requests to the KCM Chair for reconsideration the TB SR Selection process for. Public private mix initiative and Kenya Innovative Challenge Fund. During its review meeting the committee, first carried out a Desk Review of key documents, which included, Minutes of the ICCs and KCM, Appeal Letters, SR Selection Procurement Documents and Selection Guidelines.

Outcome by Appeal Rounds was as:

Round 3-(Public, Private Mix): The Appeals Committee recommended to Uphold the decision of the Selection Committee, as all the organisations either failed to attach/submit the mandatory basic requirements, such as Tax Complicance Certificates, Stamped Audited Financial Reports, and/or an organization not meeting the criteria set. as required in the application.

Round 4-(Kenya Innovate Challenge Fund): The 15 of the organisations also failed to satisfy the Select Committee at the initial stage by slipping on some technicalities like, not adhereing to the proposal guidelines, low scoring at preliminary levels, disconnect in attachments/invalid certificates and/or lack of county recommendation letters,

The 16<sup>th</sup> Organisation, Malteser International was granted another opportunity to be reviewed. This was after the PR confirmed that the organization had submitted its documents on time, with all attachments, but there had been an error on its side, where they missed out on this. The Appeals committee therefore recommended that to ensure fairness Amref/TRC reviews the application and present the outcome to TB ICC and finally to KCM. In the meantime, PR/ Amref is to apologize to the Organization.

The Appeals Committee then requested the KCM to:

- -Approve appeals committee report,
- -Communicate the outcome with all appellants.
- -Sensitize organizations on the need to observe call for proposal guidelines
- -Fill in vacant slots in Appeals Committee, including a Procurement Specialist
- -Multilateral Representative in Appeals Committee has been assigned duties in Geneva

### Discussion

The KCM members commended the Appeals Committee for the thorough review and objective recommendations.

### Way Forward.

The KCM approved the Appeal Committees requests.

## MIN/7/1/3/2019 - Review and Approval of SR Selection Reports

• PLHIV networks to implement HIV grant in 5 remaining Counties Presented by Technical Review Committee Chair – Rose Kaberia

The KCM had in an earlier meeting approved the engagement of PLHIV networks being engaged to implement some activities. The process of recruiting the organization to implement in Five counties, namely, Garissa, Wajir, Mandera, Tana River and Lamu counties, has been ongoing, and the Technical Review Committee presented a Report of the Onsite Capacity Assessment of Networks for PLHIV in Five Counties to the KCM for consideration.

The process began with a call for Proposals which was done on December 2018. 14 proposals were received and Administrative and technical review of the proposals was conducted in 21<sup>st</sup> to 25<sup>th</sup> January 2019. The OCA was conducted between 11<sup>th</sup> to 14<sup>th</sup> Feb 2019.

During this process, each OCA team was composed of a TRC member, CHMT (CASCO, CACC, Community Strategy Coordinator, SCASCO, PHO, CCC in charge), KRCS staff (program and Finance). The approved Tools utilised included assessment of Leadership & Governance, Program Management and Financial Management. At the end, individualized OCA reports were produced for each organisation.

The TRC made recommendations on organisations, by counties, as: T/River- Kipini Integrate Community and Chao Support Group; Garissa – Women Initiative Healthcare (WEFKO); Wajir - Organisation of People Affected by HIV and AIDS (OPAHA); Mandera - Mandera OPAHA, and, Lamu – Tuvumiliane Witu.

The TRC then requested the KCM to endorse the HIV ICC approved (six (6) Networks of PLHIV) to implement in the 5 Counties

#### Discussion

The KCM members were satisfied with the presentation by the TRC, and lauded the Team for the good work.

## Way Forward

The Report was unanimously endorsed.

Kenya Innovation Challenge Fund for TB
 Presented by Dr. Kimuu for TB-ICC Chair

Under the Strategic Initiatives, PR/Amref received funding to support innovations could lead to finding missing people with TB in the communities and link them to TB diagnosis and treatment services. During the KCM meeting of 6<sup>th</sup> December, 2018, the TB-ICC updated the meeting on status, which included, in total, they had received, 208 applications, identified 25 applications out of which 20 had moved to defense stage. The next step was to subject the 20 to a Concept Defence, after which they would be required to submit a full proposal.

The Technical Review Panel presented to the KCM the outcome of this processes as:

The criteria for Final Recommendation: Selected organizations recommended for funding had to meet the following requirements: (i) Demonstrate they can actively look for missing people with TB; (Pass mark of at least 60% of combined technical evaluation and capacity assessment score). Only a maximum of 10 organisation can be funded, with the top two being recommended for Nairobi, which contributes 20% of cases in the country; has the key populations identified in the prevalence survey and PPM interventions already funded). The other best eight from the other counties allowing for geographical spread.

The qualifying organisations which the committee had approved, and the areas of jurisdiction were: Nairobi - KAPTLD with a 80.9% - proposes to use USSD platform for enhanced selfscreening for TB in informal settlements; TAC Health Africa with a 76.3 score. They propose to use manned call centers and financial support to enhance screening for TB in informal settlements and Sema Ltd - scoring 66.9, proposes Use of Automatic Screening Teller Machine (ASTM) for self-screening of persons seeking services at Huduma Centers, Passport control office and SGR terminus. Kakamega - Community Support Platform - score 78.4, Using school-going children to screen family members and household contacts. Homabay – Heroes Oasis Counselling Centre, scored 74.5% and proposes to Strengthen TB screening in prisons through enhanced use of champions as well as Use USSD platform for self-screening in the community. Kajiado - Nais Healthcare Ltd, with a 65.3 score, proposes to Integrate private sector and incentives to increase TB screening in informal settlements. Kiambu – Resources Oriented Development Initiative with a score of 77.8, proposes to (i) Expand TB screening in congregate settings to include detainee cells, prisons and police officers and their families, (ii) use of SMS for self-screening of plantation and Industry workers. Mombasa - North Star Alliance with a 77.8% score plans to Expand TB screening services for truck driver and corridor communities; and, Partnership for a HIV free Generation with a 77.0% score, will also work in this county through Finding people with TB among Matatu crews and associates with linkage to Health Facilities.

The Technical Review Committee and TB/ICC therefore, was requesting the KCM to approve its recommendation to enable moving to the next step.

#### Discussion

The representative for PLWD/TB raised a concern over some of the qualified organization, which were listed as Limited Companies. She intimated that the implementers were supposed to be CSOs, feeling that private companies may use this as profit making avenues.

The Committee informed the meeting that there application as contained in the GF guidelines indicated that the challenge would be open to public and private, and therefore, there was no clause to bar any applicant.

The Representative from the Formal Private Sector cited a clause in the GF Website that indicated that implementation of GF grants was open to Private enterprises. She also informed the meeting that during a visit to Tanzania, they had come across an organization named AFTAA, which was private sector, implementing and it would be important for the country to also embrace the direction too.

### Way Forward

Upon thorough deliberations, the Meeting approved the Committee Request, but with a caveat, that only the Civil Society Organisations were approved. For the private sector organization, the Secretariat was required to consult with the Country Team, and give the feedback to members who would then give their approvals online.

MIN/8/1/3/2019 - Oversight Committee Report

The Oversight Committee presented to the Meeting the report of its meeting held on 28<sup>th</sup> February, 2019 starting with the meeting Overview, Grant performance status, Oversight Committee recommendations to improve Grant Performance and finally, Save the dates status of the period up to June 2019.

National Treasury/HIV Grant rating, A2; Cumulative Budget 68,152,693; Expenditure 4,965,710, Funds Committed 8,368,489.28, with a Funds Absorption Rate of 7.3%. National Treasury/TB Grant rating, A2; Cumulative Budget 13,894,020; Amount Expensed 6,515,139, and a Funds Absorption Rate 47%. National Treasury/Malaria Grant rating, B1; Cumulative Budget 5,923,129; Amount Expensed 2,808,554 and a Funds Absorption Rate 47%. KRCS/HIV Grant rating, B1; Cumulative Budget 20,053,579; Amount Expensed 11,277,192 and a Funds Absorption Rate of 56%. AMREF/TB Grant rating, A1; Cumulative Budget 14,240,994; Amount Expensed 6,691,955 and a Funds Absorption Rate of 47%. AMREF/Malaria Grant rating, B1; Cumulative Budget 5,497,507; Amount Expensed 3,638,276 and a Funds Absorption Rate of 66%. Co-Financing – The cumulative Budget; 29,129,272 and so far. 13,415,126 has been expensed.

The reasons for varying funds absorption rates was explained as due to: (i) Late disbursement of funds at the start of the new grant (March/April 2018), (ii) Lengthy approval process to open new accounts for National Treasury grants; (iii) Delays in procurement and payment for deliveries of commodities: (Specification and approval delaying procurement & Tax exemption delaying delivery and payment); (iv) Delayed Sub Recipient engagement due to lengthy in country selection processes; (v) TNT-HIV additional funds from CIFF (USD3,954,564) reflected in P4 Budget and, (vi) KRCS-Funds absorption rate affected by Cash transfer programme in Turkana – The programme has been redesigned; registration of girls is slow due to lack of identification documents.

The PRs are exploring different/diverse approaches to address the low absorption. The strategies include: (i) Strengthen procurement monitoring system for more efficient commodity management across the value chain, (ii) Finalize SR selection process and first track grant implementation, SR Selection report (KRCS and AMREF) presented to KCM for approval; (iii) Fast track issuance of tax waivers and exemptions to ensure timeliness in Port Clearance and distribution of Tax Exempt Commodities; (iv) Resolve issues around DAGA resolution for

smooth flow of antimalarial commodities supported by PMI; (v) Further verification of non-functional microscopes by an independent team of biomedical experts, and finally, (vi) Strengthening of ICCs.

# MIN/9/1/3/2019 - Management Committee Report

The Presenter took the Meeting through the report of the Management Committee meeting held on 25<sup>th</sup> January, 2019. The Committee reviewed the findings of the OIG Audit Action Points, KCM Performance, as well as Upcoming Events/activities. The Committee, looking at the OIG Audit report discussed the outcome, and requested that Principal Recipients continuously share Updates on the progress made on implementation of OIG recommendations and observe the set timelines/roadmap.

## MIN/10/1/12/2018 - Any Other Business

Acting Chair

The meeting was informed that the County engagement meeting were scheduled to take place between 18<sup>th</sup> and 29<sup>th</sup> March, 2019. The Secretariat had been working with the COG-Health Secretariat, and letters of invite had been sent out, and confirmations received.

The Study by GF on Human Rights Assessment had been approved by the Principal Secretary, and the Consultant/T.A was expected in the country in due course.

There being no other business, the meeting ended at 02.30pm

Signed:	S S	Date 13/66/	13/66/2019	
	Mr. Samuel Muia KCM Coordinator		/	
Signed:	Mr. Edward Mwangi	Date: 13/06/201	2	