MINUTES OF THE SPECIAL KCM MEETING HELD ON 05.05.2020 - VIRTUAL

Present

1. Ms. Susan Mochache, CBS

2. Ms. Faith Ndung'u

3. Dr. Benhard Ogutu

4. Dr. Ischar Oluoch

5. Ms. Faith Muigai

6. Dr. Pierre Bello

7. Mr. John Kihiu

8. Dr. Mehdin Tsehaiu

9. Ms. Maurine Murenga

10. Mr. Peter Njane

11. Ms. Joyce Amondi

12. Mr. John Kamigwi

13. Ms. Jane Wamoko

14. Mr. Jonathan Kiliko

15. Mr. Philip Nyakwana

16. Ms. Rosemary Kasiba

17. Mr. Samuel Muja

Principal Secretary/Chair Member/Vice Chair

Member/KEMRI

Member/COG

Member/Formal Private Sector

Member/French Embassy

Member/Informal Priv. Sector

Member/DP-ML

Member/PLWD-HIV

Member/KP

Member/AYP

Alternate Member/NACC

Alternate Member/TNT

Member/FBO

Member/PLWD-TB

Member/KP

KCM Coordinator

In attendance

1. Mr. John Ochero

2. Ms. Soukeyna Sylla

3. Dr. Joseph Kibachio

4. Dr. Carolyn Olwande

5. Dr. Meschack Ndirangu

6. Ms. Zilpha Samoei

7. Ms. Annette Msabeni

8. Ms. Khalda Mohamed

9. Mr. Kevin Ogollah

10. Ms. Margaret Mundia

11. Ms. Josephine Mwaura

Country Team

Country Team

MOH/Strategic Health Programs

UNAIDS

AMREF

Alternate/FBO

KRCS

KRCS

KCM Secretariat

KCM Secretariat

KCM Secretariat

Absent with apology

1. Mr. Edward Mwangi

2. Mr. Latif Shaban

PLWD/Malaria

Member/FBOs

Agenda

1. Introduction/Apologies

2. Welcome Remarks from the Chair

3. Declaration of conflict of interest

4. Review and confirmation of previous minutes of the KCM Meeting held on 30.01.2020 &

25.02.2020 / Matters arising

5. Oversight Committee Report-Oversight Committee Chair 6. KCM Eligibility Performance Assessment (Orientation on EPA Light Assessment/Tools & KCM EPA Self-Assessment draft report/way forward)

7. Endorsement of KCM Reallocation Request 8. Funding Request Application- additional COVID-19 Response Mechanism Support

9. Management Committee Report -KCM Vice Chair

10. AOB/Closure

Meeting called to order at 9.20am. The Chair requested to have Agenda 5 moved to the last item of the day. Agenda endorsed with amendment as:

Proposed by: Zilpha Samoei Endorsed by: John Kihiu

Apologies were registered as above.

Min 2/5/1/2020 Welcome Remarks from the Chair

The KCM Vice Chair started off the meeting by thanking members for finding time to attend. She informed the meeting that the Chair would be joining the meeting in a few minutes. She asked members to share their views on the agenda at hand, while considering the limitations that encompass virtual platforms.

She noted that she looked forward to a meaningful and productive engagement.

Min 3/5/1/2020 Declaration of Conflict of Interest

Members in attendance who had perceived COI and PR representatives were asked to recuse themselves from the meeting.

Min 4/5/1/2020 - Review and confirmation of previous minutes of the KCM Meeting held on 30.01.2020 & 25.02.2020 / Matters arising

The KCM Coordinator took members through the 2 sets of Minutes. Corrections/amendments of the minutes were as:

30th January 2020 Minutes:

Correction: Pg. 3 Minute 4 of January 2020 Minutes: Confirmation of Minutes

Endorsed by Lucy and instead it should be Seconded. Page 10: Last Paragraph, First Sentence: "Discussion" Members felt that the budget attached to the activity was high, and requested for clarification. Page 11: Minute 9, Second Paragraph corrected to read - "Mr. Kamigwi informed members that the Ad Hoc committee had met twice and recommended that there was need to engage a consultant to draft a proposal detailing costed options of channeling GF Funds in Counties and recommend on the best option"

Members endorsed the Minutes with highlighted amendments as:

30th January 2020 Minutes:

Proposed by: John Kamigwi Seconded by: Rosemary Kasiba

Minutes of the meeting held on 25.02.2020

Agenda on Ad hoc committee for PR selection: The representative from PLWHIV, issued a clarification, that she requested be Minuted, stating that the Constituency had declined the offer to take up the Communities slot in the PR Selection Adhoc committee that was previously held by the PLWD/Malaria.

Page 2 – Min. Endorsement of the Agenda: Secondment by Dr. Medhin captured as endorsement: Minute 4: Pg 4: Writing Team, endorsed by John Kihiu: All these areas should be corrected to read "Seconded".

Discussion and Way forward: Some of the Non state requested to be added to the adhoc committee, sentence reworked to read the KCM Constituted the adhoc committee.

Members endorsed the Minutes with highlighted amendments as:

February Minutes:

Proposed by: Maurine Murenga Seconded by: Philip Nyakwana

Matters Arising

A template containing details of matters arising was shared to Members, and presented with the current status. All the matters had been completed/implemented except for: Agenda: Min 9//1/1/2020 (January Meeting). Update on the progress was made in defining Implementation arrangements of Global Fund Grants in Counties. A presentation /request for technical assistance was made to the DPHK on 13th March, 2020. A detailed report to be presented by the Management Committee in its report. Process still ongoing.

Min 5/5/1/2020 -Oversight Committee Report by Chair

The Chair of the Oversight Committee presented an outline of the committee report presentation as: summary of deliberations of the Oversight Committee meeting held on 27th February 2020; report on funds absorption for period 8 inclusive of commitments as recommended during the KCM meeting held on 30th January, 2020. He also informed members that a Joint Management and oversight Committee meeting scheduled for 21st May, 2020 during which time, the review for grant performance for period 9 will be carried out.

The Oversight Committee Chair presented the Grant performance update as presented to the Committee by the ICCs for the grant performance as: PR/National Treasury – HIV Grant rating A2, Absorption Period 6- 19%, Period 7- 29%, & Period 8 Absorption + Commitment 78.9%; National Treasury/TB Grant rating B1, Absorption Period 6-71%, Period 7-73%, & Period 8 Absorption + Commitment 81%; PR/National Treasury/Malaria - Grant rating B1:- Absorption Period6-16%, Period 7- 18%, & Period 8- Absorption + Commitment 73%. PR/Kenya Red Cross – HIV Grant Rating A2, Absorption Period 6- 60%, Period 7- 64%, & Period 8 Absorption + Commitment 74.5%. PR/Amref H. A., Grant Rating A2: Absorption Period 6- 72%, Period 7-72%, & Period 8 Absorption + Commitment 77.5%. PRs were requested to share current grant performance and effect of reprogramming request approved by GF on the overall funds absorption.

The Oversight committee made recommendations as follow: KEMSA to Fast track procurement of all contracted commodities; KEMSA to ensure warehouse is completed and operational by 28th May,2020; PRs to reprogramme savings/postponed activities; KCM to negotiate with GF for a waiver on tax refunds for procurements below 2,000 dollars; fast-track the transition of support / Stipends for CHVs - 4 Counties have transitioned so far; ttimely payment of stipend to CHVs for Counties that have taken over this and Ministry of health to finalize and share transition plan for GF supported staff.

Discussion/Way Forward

KEMSA Warehouse reported to be completed by May 28th,2020 There is need to get clarity, and probably a visit to be scheduled by early June, and the team to brief the KCM on the progress so that confidence in the process can be maintained. Goal: Plan a visit.

KEMSA indicated that with Covid-19, the 28th of May promise is not feasible. They reported an issue in delivery of materials as well as movement of manpower. To this end, KEMSA has indicated that they will be coming back to the NT with more realistic timelines.

The Absorption by TNT still very low – long discussion on commodities that needed to be paid for. Suppliers not able to get commodities in time. Most of the funds are committed. TNT to explain further. Period 6 & 7 had challenges.

The matter of absorption of CHVs across Counties was still outstanding and a few counties had started paying CHVs, but a majority had not.

The issue of Human Resource supported by GF was still and outstanding issue. PRs have raised this matter before with KCM. A committee was set up between MOH and Counties for all Partner supported staff, to develop a transition plan. The staff include CHVs.

KP Member enquired what plans were in place to ensure that KP programs continue as they should be during this Covid-19 period. For example, violence on community members, raids on brothels, what is the PR doing to ensure that there is a reallocation towards legal redress:

KRCS: Reallocation was sent out before issues of nutritional support and legal redress were raised. However, engagement with other Government agencies is ongoing, to ensure nutritional support is made available. More engagement between PR and SRs is to continue, to ensure the PR addresses needs as they arise,

AMREF: Informed the KCM that meetings with SRs was ongoing to ensure that communities' interests are addressed. The PR had also embarked on the process of mapping high risk areas for effective response. Sensitization on Covid-19 to SRs was also ongoing, as well as equipping them with PPEs and proper messages.

Members were also concerned that Covid-19 had taken all the attention of the health ministry/health workers and there was fear that gains made on the three disease would be compromised, if due attention is not given.

The KCM Chair gave members a solid assurance that Covid-19 has not taken over or rather superseded other issues. She went on to say that there was need for urgent response by the Ministry in Nairobi County as the Nairobi Metropolitan Services were still settling in office when Covid-19 broke out. However, staff in strategic intervention departments had since been released from Covid-19 response to continue with their usual assignment. She also thanked the GF for stepping up and supporting Covid response in the country.

A representative of the FBO asked the Oversight Committee if there was any documented evidence of success, and lessons learnt in the process that would help future improvement in Grant implementation. Dr Kiliko: Lessons learnt that can make us improve not only funding request, but also to increase level of funds utilization and implementation.

The three PRs shared briefly some of the efforts being made, and which are worth noting as: (i) Agreement by state and non-state on leveraging on each other's strength. E.g. procurement of GeneXpert and the IT software by Amref, which shortened the process and has made it easier for to work. This was achieved by the understanding that the efforts are for the benefit of the country and the communities, and not to serve personal interests. (ii) Use of existing structures whether at the Non State or state departments. This has seen smooth flow of services as well. (iii) Jointly agreeing on priorities during grant making processes, the Teams work together, with a common understanding that the end goal is to deliver. (iv) Constant interactions through the Quarterly Review Meetings and other KCM led forums to ensure follow up, and more so on key risk activities. (v) Activity programming, so as to stop delays, constant working engagement between PR and SRs during the selection process, seeing them through the preparatory phase.

Decisions

The KCM recommended that the Oversight Committee (i) Monitors progress of the KEMSA construction, and adherence to guidelines and timelines to avoid further unnecessary delays. The KCM Chair informed the meeting that moving forward, she will ensure that KEMSA management is present at all KCM meeting. If no feedback is forthcoming before end of May, Oversight Committee should plan a visit. (ii) The committee will also continue to track the effects of Covid-19 and its effect on GF grants implementation for early and timely response.

Min 6/5/1/2020 - KCM Eligibility Performance Assessment (EPA)

Orientation on EPA Light Assessment/Tools and KCM EPA Self-Assessment draft report/way forward

In view of the ongoing CCM evolution and a bid to incorporate its findings into the EPA, the Global Fund has decided to use the light modality of the CCM Eligibility and Performance Assessment (EPA), Light EPA. The Light EPA is a simplified process that includes (i) a self-assessment and (ii) the development and endorsement of an Improvement Plan. The purpose of the CCM Eligibility and Performance Assessment (EPA) is to help CCMs identify their strengths and weaknesses and subsequently plan specific actions to improve their performance. Compliance with Eligibility Requirements (ER) and Minimum Standards (MS) 3 to 6 is assessed both at the time of submission of a funding request and on a periodic basis throughout the period of Global Fund financing. Continued compliance with all ERs throughout program implementation is a condition to access Global Fund financing (including CCM funding). Its objective is to determine the level of functionality of a CCM and ultimately improve overall CCM performance. Designed to result in a milestone-driven improvement plan, the EPA incorporates existing evidence of CCM functionality. All CCMs are required to complete an EPA prior to the submission of a Funding Request.

The first phase of the Light EPA will include: a Self-Assessment which is a desk review where the CCM, using the Light EPA Excel Tool, provides specific comments on the level of compliance with Eligibility Requirements 3-6, gathers the necessary documents that support the CCM's level of compliance for each indicator and uploads them onto the respective country folder in the External Document Library. The second phase is for the CCM to develop an improvement plan. The improvement plan provides an opportunity to use the self-assessment findings and develop a milestone-driven roadmap with corrective actions and corresponding timelines, to help the CCM achieve full compliance with ER and MS. The Global Fund then determines if the proposed plan is reasonable and acceptable, prior to Funding Request submission.

The conditions attached to submission of the improvement plan include: (i) If the Improvement Plan is submitted and accepted by the Global Fund prior to the funding request submission, this means steps have been taken, as per the Improvement Plan accepted by the Global Fund, and CCM compliance with Eligibility Requirements is achieved. The CCM will be able to submit their funding request; (ii) If the Improvement Plan is not submitted/accepted by the Global Fund (prior to the submission of the funding request), the Global Fund will determine, at its own discretion and on a case-by case basis, how the CCM should proceed.

The GF requires that all CCM must endorse the Improvement Plan and meet in-person at least once regarding the EPA status. The Secretariat is required to continuously update the status of the improvement plan at least quarterly as this will be used to evaluate the CCM.

CCM Ethics: This is a new requirement aligned to the EPA, where the GF recommends that all CCMs set either an Ethics focal point within the CCM, or a standing committee of not more than 3 people.

Decision

KCM EPA Requirements - Members to sign the Conflict of Interest forms annually as a requirement. CCM Ethics: After deliberations, the KCM settled for an Ethics Committee comprising of 3 members with representative from Government, Non State and Development partners. The names should be submitted to the Secretariat before the next KCM meeting

Proposed by: Faith Muigai Seconded by: Philip Nyakwana

Min 7/5/1/2020 – Endorsement of KCM Reallocation Request

The Secretariat had engaged the with the Country Team and the CCM hub on existing options for supporting non state actors to participate in meetings during this period of stay at home, and more so during this period of Funding Request development. The Secretariat had been working closely with the country team and local fund agent, to propose funds which could be reprogrammed from the current funding. The funds being reprogrammed were mainly for activities which had already been completed and savings achieved, and activities that involved face to face meetings, as this was not feasible because of the pandemic.

The Secretariat was proposing to reprogram USD 39,516 broken down by activity as follow: towards the support non state KCM Members and Constituents airtime and data bundles (USD 7,820 and 18,957 respectively); Website Maintenance and Virtual Platform including IT specialist fee (USD657); IT support equipment (USD 869), Communication expense for Secretariat (USD 494); support towards HR related activities, NSSF Employer deductions and Gratuity (USD 3,610); Purchase of Laptops (USD 7109).

Discussion

The committee discussed and confirmed there was need as most of the past engagements had constituents dropping out of the call. Members felt this support was timely.

Way Forward

It was agreed that the Reprogramming Request be shared with members online, for further review and subsequent endorsement, by COB, Thursday, 7th May, 2020. The endorsed request can then be submitted to the CCM hub by Monday 11th May 2020.

Min 8/5/1/2020 Funding Request Application- additional COVID-19 Response Mechanism Support

The Global Fund has stepped up its efforts to support countries in the response against Covid-19 under the (C19RM). So far, the country has applied for the allowed USD 5.8MILLION (5% Grant Flexibilities). Under this funding, countries were allowed to either reprogram or use savings from

existing GF grants. The GF has further issued guidelines on how countries can access more support towards actions to reinforce the response to Covid-19, described as: Priority 1: not more than 3.25% of total funding for 2020-2022 allocation and Priority 2: should represent not more that 10% allocation, minus funding accessed through funding flexibilities and Priority 1 allocation. While making these submissions, countries are asked to make requests in the two priority levels to enable rapid decision making and on a rolling basis. GF will make decisions on Priority 2 according to need and availability of funds.

The three categories of eligible programming supported by C19RM include: (i) Interventions to mitigate the impact of Covid-19 on HIV/Malaria and TB programs, (ii) Actions to reinforce the impact to Covid-19; (iii) Initiatives to make urgent improvements in health and communities, including laboratory networks, supply chains and engagement with vulnerable communities.

The GF guidelines advise that implementation arrangements should be existing GF implementers at the time of the application. Countries are advised to submit this request urgently, and at least not later than 31st May 2020.

Discussion and Way Forward

The Country Team informed the meeting that GF had approved the Kenyan request, and a confirmation letter was on its way. He requested KCM to continue with its Oversight role, as this was still required, to ensure that resources were applied as indicated. During the next application windows, he advised that the applications should as much as possible include attachments detailing support from other partners to avoid duplication. The support requested should be implemented using existing GF structures. PRs should therefore ensure proper accountability and where things were not clear, not shy away from consulting with the CT which was available to offer support.

The member from KEMRI requested for integrated as well as support to health systems as much as possible.

The KPs representative requested for an all-inclusive writing Team to ensure each group is well represented as well as activities in the request be community geared and community led for added impact

The member from Private Sector/Informal once again reiterated the need to support the informal sector, given that their engagement is in congested areas, and therefore, high level exposure to different diseases.

The representative from PLWD/TB requested that a lot of the interventions be community oriented, and avoid commoditizing the grant.

Representatives from the PRs confirmed to the meeting that they were part of the writing team, and this was a way of ensuring smooth implementation. They further requested if the KCM could consider having a costing expert to cost community activities, moving forward. They also confirmed there has been a lot of efforts around creating awareness and behavior. More

community targeted interventions were still needed to ensure reduction of stigma and strengthen home care support, through CHVs.

The head of Strategic programs at the Ministry of Health, said there was need to support National programs, and KCM should ensure that no parallel programs are started. He cited particularly, mass testing, disease surveillance and contact tracing as the areas requiring serious attention.

The KCM Chair proposed that the current Fund Request Writing Team be engaged to avoid long processes of setting up other another committee. She advised the team to engage with the Resource Mobilization Committee which is multisectoral. She asked the writing team to consider support to quarantines centers as this is an area that really needed resources. She went on to say that there was limited time, and the writing team should ensure that submission was done by end of May.

The representative from counties, informed the meeting that the issue of Covid-19 response and engagement of CHVs should be coordinated at the county level. She noted that Covid-19 response is a delicate process, with many dynamics and therefore, any support must be in alignment with the Health committees.

Decision

Members proposed a Nine (9) member committee from the different entities as: Government 2; non state 2; development partners 2; representative from Resource Mobilization 1 and PRS 2. The names are to be shared with the Secretariat by COB 05.05.2020. The Team to deliver on its mandate by 21st of May 2020.

Proposed by: Ms. Susan Mochache Seconded by Maurine Murenga

Min 9/5/1/2020 - Management Committee Report - Presentation by KCM Vice Chair

The committee presentation was outlined as: Update on Funding Request Application; Update on Renewal of KCM Membership; Defining Implementation arrangements of GF in Counties; GF Support for Covid -19 Response in Kenya; Implementation of KCM Work plan and Budget and PR Selection Process.

Funding Request: Development process was on course, an alternative FR roadmap developed and all Physical meetings/retreats currently held virtually. National Dialogue held successfully on 21st April, 2020, while Dialogue had been held for over 17 Constituencies/thematic groups. The next steps include costing of Gaps/ Priorities. KCM to endorse modular/RSSH Splits on 13th May, 2020 theater development of draft 0 will commence.

KCM calendar presented due dates was presented as: FBOs 16th March 2020; also, the PLWD/Malaria and KPs had own outstanding since 2019. The KP had submitted a list of proposed members to the KCM (2 members and 2 alternates). However, one of the nominees had served his term in the KCM as indicated in the Constitution and was not eligible for re-election. The Management Committee recommended that three out of four Nominees presented by the Key

Population Constituency to assume Office. Key population Constituency to replace the nominee who had already served since June, 2016. Section X KCM Constitution "Upon replacement of a member the new member shall serve the remaining period of term of office of the member being replaced. The Committee also presented a request to KCM to endorse the changes in the Formal Private Sector.

Defining Implementation Arrangements of Global Fund Grants in Counties: A Presentation /request for technical assistance was made to the DPHK on 13th March, 2020. The DPHK advised that since a similar assignment was being undertaken by GAVI there was no need to duplicate and instead wait for the outcome of the findings. DPHK asked KCM to review the scope work for GAVI Assignment and establish if the outcome will inform decision by the KCM on flow of funds to Counties-Documents shared with KCM Members/Adhoc committee on 18th March,2020 for review –Way forward to inform the funding request narrative.

GF support for Covid-19: To be discussed as a substantive agenda.

Implementation of 2019/2020 KCM Work plan/Budget: KCM activities had been ongoing. The pending activities include: Constituency Annual Meetings Engagement, 2nd Oversight Visit, KCM retreat and finalization of the KCM Strategic Plan-Data collection/Interviews by the Consultant currently ongoing-Questionnaire shared with KCM Members. These are activities that had been scheduled to take place between February and June 2020 but have affected by the measures put in place to control spread of Covid-19. KCM Funding agreement signed and submitted to the Global Fund.

PR Selection: Advertised went out to the public on 14th April,2020 via KCM Website, Standard & My Gov News Paper, Tender No: RFP/KCM/001/2019-2020, tender closing out on 6th May 2020 at 10.00am public opening of bids to follow immediately. Tender opening Committee and independent review committee established.

Discussion and Way forward

A concern was raised concerning two constituencies that were yet to renew their membership which is KP and PLWD/Malaria. The submitted list of KP members had raised a concern as a proposed Substantive member had already served his term, and according to the KCM Constitution.

After thorough deliberation, the representative from PLWD/HIV noted that the clause in the constitution did not clearly outline, and there was a gap. For this reason, she proposed that the member be allowed to serve until the end of the term, while at the same time, the Constitution is refined, to avoid uncertainty in future. The Malaria Team was asked to urgently submit their

Decisions:

The meeting allowed the request to have the member continue.

It was also noted that the KCM Constituency election calendar remains as it is, and members should take note of this, and update their membership when it is due.

Endorsement for Key Population members

Proposed by: Maurine Murenga Seconded by: Faith Muigai

A committee to be set up to look at the areas in the KCM Constitution that needs attention consisting of one representative (KCM Member or alternate) each from Government, non-state actors and development partners.

Proposed by: Philip Nyakwana Seconded by: Medhin Tsehaiu

Min 10/5/1/2020 - AOB/Closure None

There being no other business, the meeting ended at 15.05pm.

Mr Samuel Muia

KCM Coordinator

Sign: Ms. Faith Ndungu KCM Vice Chair

16/06/2020

Page 11 of 10