



KENYA COORDINATING MECHANISM
MINUTES OF THE KCM MEETING HELD ON 16TH FEBRUARY, 2023 FROM 9.35AM TO 1.55PM AT AFYA ANNEXE, KNH GROUNDS, 302 BOARDROOM

PRESENT

1. Ms. Faith Ndungu
2. Dr. Ruth laibon Masha
3. Mr. Philip Nyakwana
4. Mr. Lattif Shaban
5. Dr. Medhin Tsehaiu
6. Mr. Peter Mwarogo
7. Mr. Brian Rettmann
8. Dr. Bernhards Ogutu
9. Ms. Pamela Kibunja
10. Mr. Peter Njane
11. Ms. Eva Muthuuri
12. Ms. Rosemary Kasiba
13. Ms. Zilpha Samoei
14. Ms. Patricia Mwende
15. Mr. John Kihui
16. Ms. Maurine Murenga
17. Mr. Samuel Muia

KCM Vice Chair (Chairing)
Member/Gov/NSDCC
Member/PLWD-TB
Alternate Member FBO/SUPKEM
Member/ML/UNAIDS
Member/Counties/ COG
Member DP/BL/PEPFAR
Chair Oversight Committee/ Member KEMRI
Alternate NGO
Member/KP Rep-NSA
Member/PLWD/Malaria
Member/KP Rep.-NSA
Alternate FBO/CHAK
Alternate/ Private Informal Sector
Member/Private informal sector
Member PLHIV
KCM Coordinator

In Attendance

1. Mr. Douglas Bosire
2. Mr. Ahmed Said
3. Ms. Consolata Opiyo
4. Mr. Vincent Obwanda
5. Mr. John Muiruri
6. Ms. Margaret Ndubi
7. Dr. Newton Omale
8. Ms. Maureen Milanga
9. Ms. Alice Njoroge
10. Dr. Eunice Omesa
11. Mr. Job Akuno
12. Ms. Angella Langat
13. Dr. Eunice Omesa
14. Ms. Rose Kaberia
15. Mr. Kipruto Chesang
16. Ms. Jane Kitonga
17. Dr. Kigen Bartilol
18. Dr. Nazila Ganatra

Alternate /Gov/ NSDCC
Alternate /KP Constituency
Alternate/PLWD/TB
Alternate /KP Constituency
Alternate PLWD/Malaria
Chair TRC/ FR Core Team Member
FR Core Team Chair
FR Core Team Co-Chair
FR Core Team Member
FR Core Team Member.
FR Core Team Member
FR Core Team Member
FR Core Team Member
HIV ICC/HIV TRC Chair
DPHK
AMREF HA
MOH
Chair HSWG

19. Ms. Sharon Olwande
20. Dr. Kisia Jackline
21. Mr. kipruto Chesang
22. Dr. Meshack Ndirangu
23. Dr. Bernard langat
24. Ms. Gloria Akoko
25. Ms. Khalda Mohammed
26. Ms. Caroline Ngari
27. Mr. John Kamigwi
28. Ms. Margret Mundia
29. Mr. Kevin Ogolla
30. Ms. Josephine Mwaura

CHAI
 Lead TB Program
 CDC Kenya
 Amref Health Africa in Kenya
 Amref Health Africa in Kenya
 Amref Health Africa in Kenya
 KRCS
 NSDCC
 KCM Secretariat
 KCM Secretariat
 KCM Secretariat
 KCM Secretariat (Taking Notes)

Apologies

1. Dr. Serawit Bruck-Landais
2. Mr. Titus Munene
3. Ms. Joyce Ouma
4. Ms. Jacinta Mutegi

Alternate DP/BL
 Member FBO/MEDs
 Member/AYP
 Member FBO

Agenda

1. Call to order/Introduction/Apologies
2. Declaration of Conflict of Interest
3. Remarks by the KCM Chair
4. Review and confirmation of Minutes of the KCM Meeting held on 11th January,2023
5. Review and Approval of HIV TRC SR Selection Report on HIV Innovation Fund.
 - Presentation by the HIV TRC Chair
6. Review and approval of the KCM TRC Evaluation on Selection of a Consultant to map Existing Health Governance Platforms and Development of KCM Positioning Plan.
 - Presentation by the TRC Chair
7. Discuss and approve Management Committee/Fund Request Core Team Report
 - Joint Presentation
8. Discuss the C19RM Portfolio optimization wave 2/next steps
9. Selection and endorsement of the KCM Vice Chair
10. AOB
11. Closure

Min1/1/2/2023 Call to order/Introduction/Apologies

Meeting called to order at 9.35am. Opened with a word of prayer.

Introductions and apologies are as above.

The agenda was projected and amended to have agenda item 4 on Review and confirmation of Minutes of the KCM Meeting held on 11th January,2023 deliberated following agenda No. 7 on Discussing and approving the Management Committee/Fund Request Core Team Report. The amended agenda was adopted as: -

Proposed by Ms. Rosemary Kasiba

Seconded by Dr. Medhin Tsehau

Min2/1/2/2023 Declaration of Conflict of Interest

Ms. Rosemary Kasiba highlighted a perceived COI on Agenda 5 on Review and Approval of HIV TRC SR Selection Report on HIV Innovation Fund. This was because she comes from a network that had applied for one of the positions. She however did not personally make the application herself.

Decision

The member representing the Key Population would only listen to the deliberations but not take part in the final decision making.

Min3/1/2/2023 Remarks by the KCM Chair

The chair appreciated the KCM Members, FR Core team, PRs, KCM TRC Chairs and other stakeholders for joining the days meeting. That the days meeting was critical to the KCM Cycle and calendar which would enable the KCM review important reports and steer the country towards the Funding request process.

She requested that all members and in attendance to participate actively during the meeting based on the agenda items.

AGENDA	DISCUSSION	RECOMMENDATION
Min 5/1/2/2023 Review and Approval of HIV TRC SR Selection Report on HIV Innovation Fund. Presentation by the HIV TRC Chair	<p>HIV TRC SR Selection Report on HIV Innovation Fund highlighted and discussed.</p> <p>(Report annexed)</p> <p>Discussion/ Queries. TRC to provide further information on basis of the recommendations made.</p> <p>The speaker referred to the TRC Feelings, were the Term of Reference set out from the beginning and clear to everyone?</p> <p>TRC to provide information on how many AGYW, Young KPs organizations had bided on the innovative challenge positions?</p> <p>What was the geographic spread for the AGYW? Is there implementation in PEPFAR regions? If so, are there possible areas of synergy/complementary nature of the grant?</p> <p>What is the focus of the North star Alliance? Did their innovation cut across all the three bids?</p>	<p>Decision 1</p> <p>Team to re-work the report to align to the TORs and come with clear recommendations for KCM adoption.</p> <p>TRC to further refer to the call made; guidelines, criteria, cut off score and findings</p> <p>Decision 2</p> <p>Team to revert back to the KCM within 3 weeks.</p>

On the Conclusion, what is the highlighted subsequent stage?

what was the cut off/Pass mark to proceed to subsequent states? Justification for the diverse selection of applicants?

How many applicants were being on boarded for each category as per the call/advertisement?

From the report, what was the HIV TRC asking of the KCM?

What does the consideration for cheap vs cost effectiveness entail?

What is the size of investments involved and considerations made in decision?

Did the team borrow best practices from technical and financial assessment. Whether the team undertook a capacity assessment?

Whether the TRC Considered partner support from organizations that had made considerable impacts in such areas such as the Amref HA and Government?

Was available data used to inform the budgeting processes and award by the PR.

Can the TRP demonstrate clear Geographical allocation, Criteria, Technical vs financial commitment considered in the award of the innovation challenges.

Responses

That various bidders represent different categories of advertised bids. Example, for categories 1 &2 under AYPs – the available budget would be allocated between 2 SRs *i.e.*, the Rising Winners Youth Empowerment and Build and Empower CBO.

That the SR- North star made one application for the three innovations and based on available criteria, they had qualified for all the three bids

	<p>(The solution/technology can be used for all the three innovations) but were however awarded the Human Right and Gender portfolio.</p> <p>That whereas the reader made reference to the TRC Feelings, these were just figure of speech. The TRC had set guidelines and criteria upon which they followed.</p> <p>That each innovative challenge had specific budgets for each intervention. For the young KPs, 2 organizations emerged as top. The pass mark was 65% score for implementation.</p> <p>That based on budget availability and stipulations on the concept note, the innovations under the Young KP had a budget was 46 million, AYP had a budget of 5 million and those under human rights had a budget of 10 million.</p> <p>That KRCS undertake HIV Programming in all the 46 Counties but are only undertaking AYP programming in 5 Counties.</p> <p>Next stage in reference to the conclusion refers to a request for KCM approval to allow the KRCS make communication to the applicants.</p> <p>Regarding TRC membership is diverse and NSDCC is represented on the HIV TRC. During application, the KRCS consulted widely with AMREF HA.</p> <p>On the concern on spreading too thin, various applicants applied to implement in specific regions.</p> <p>The uniqueness of the innovations characterised the various applications and these differ from Organization to organization hence different outcomes.</p>	
Min6/1/2/2023 Review and approval of the KCM TRC Evaluation on Selection of a Consultant to map Existing Health	KCM TRC Evaluation on Selection of a Consultant to map Existing Health Governance Platforms and Development of KCM Positioning Plan (ANNEXED)	Decision 1 The KCM adopted the report as proposed by

Governance Platforms and Development of KCM Positioning Plan. Presentation by the TRC Chair

Ask

That the KCM adopts the Report to allow the KCM Secretariat make communication to the applicants and subsequently on board the most suitable applicant.

Discussion

What are the allowable timelines of award for consultant to undertake the assignment?

Report is clear and KCM can go by the recommendations made.

In terms of Quorum, whereas more than half of the TRC Members joined the meetings, only three members did the actual work. whether there was available guidance on quorum constitution.

What was the position of KCM in member commitment and inclusion of member participation in the TRC?

For the demonstrations, did the other four other applicants participate?

Response

In regard to timelines, this particular assignment on mapping health governance bodies and platforms was delayed due to the retendering process. That execution of the consultancy was about 4 months away and tied to the submission of the eligibility performance and FR application.

Clarification was made that during the demonstration, all applicants were invited and attended. That the TRC provided for a physical meeting but provided a virtual link.

On the day of demonstration, one member joined virtually but later dropped off the call. It was the Other three members who joined physically who ended up wrapping up the scores.

The last meeting on report writing, attended by

Mr. Latif Shaban and

Seconded by Mr. John Kihiu

Decision 2

The management Committee to take up the responsibility to discuss and develop a commitment clause for members to sign prior to undertaking any assignment.

Decision 3

Management Committee to discuss on possible repercussions for members who do not undertake the assignments assigned to them.

Decision 4

Best practice the report was coded, and this protected the integrity of the organizations and applicants. Going forward KCM to deliberate on feasibility of adoption of the same for all reports as a best practice.

	75% of the TRC Members, attracted no descending voices. All members supported the process.	
Min7/1/2/2023 Discuss and approve Management Committee/Fund Request Core Team Report Joint Presentation	<p>Management Committee/Fund Request Core Team Report projected and shared. These included: -</p> <ul style="list-style-type: none"> • TORs for the FR Core Team • FR secretariat projected. • Roles of various stakeholders in the GC7 FR • FR Application- Road map and budget (ANNEXED) <p>Discussion</p> <p>What attempts had been made to marry the COP and GF processes to ensure the country budgets are one.</p> <p>That the writing process is required to be compliant to the Country National Strategic plans.</p> <p>With the diverse submission timelines between the COP and GF Processes. How then does the team consolidate the two.</p> <p>Following the FR Application- Road map and budget, what are the possible budget Cost saving rationales instituted?</p> <p>Inputs</p> <p>Regarding the process, there is need for a more segregated/ specific road map with clear timelines for each activity.</p> <p>The country dialogue processes to have a tool with specific deliverables in thematic areas to guide the deliberations.</p> <p>Within the above defining documents, have the HIV module, include the Key and Vulnerable Populations.</p> <p>The TORs need to marry all the KCM processes.</p>	<p>Decision1</p> <ul style="list-style-type: none"> • TORs for the FR Core Team approved • FR secretariat approved • Roles of various stakeholders in the GC7 FR approved • FR Application- Road map and budget approved <p>Proposed by Ms. Rosemary Kasiba</p> <p>Seconded by Ms. Patricia Mwende.</p> <p>Decision 2 KCM Secretariat to share the updated TORs, and other documents by Friday 17th February.</p> <p>Decision 3 The constituents / chair of Non state, PRs, Development partners and other stakeholders to be swift in nominating the FR Secretariat by COB Wednesday 22nd February 2023.</p> <p>Decision 4 All subsequent reports following the FR Writing process, to be received as peace meals over time which will ensure all</p>

	<p>Whereas the contribution, recognition and inclusion of the PRs is a welcomed move, there is need to better define the PR role in the writing process.</p> <p>Team to ensure that Membership of the FR Secretariat is balanced and ensure inclusion of all the Global Fund stakeholders.</p> <p>Core team to serve better in coordinating the nomination of the FR Secretariat as the Constituencies will eventually do the nomination.</p> <p>There is need to list and identify the documents/NSPs to support the FR Application.</p> <p>When on boarding the Consultants, there is need to engage the communities in defining the roles of the consultants who will specifically work with them.</p> <p>Feedback Mechanism from the FR Core team, FR secretariat, KCM and other stakeholders to be better defined.</p> <p>Need to have meaningful engagement of the communities, HSWGs, KCM by capacity building. Further sensitize the communities on the NSPs</p> <p>Have an all-round Gap table from Structural changes from MOH as well as Communities.</p> <p>Responses</p> <p>The COP Processes started on 16th February 2023. On leveraging on COP 7 and GC 7 processes– direction provided is that the secretariat works closely with COP 7 TWG. Slot for the PEPFAR awarded at the FR Secretariat. Critical to Optimise the resources available for the country.</p> <p>The FR budgetary Costs were in Kenyan</p>	<p>stakeholders engage meaningfully.</p> <p>Decision 4</p> <p>All recommendations will be implemented and incorporated in the TOR.</p> <p>Decision 5</p> <p>KCM to start the process of resource mobilization.</p> <p>The work plan and budgets were adopted as Proposed by Ms. Patricia Mwendu</p> <p>Seconded by Ms. Eva Muthuuri</p>
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	<p>Shillings and Mirrored the previous FR processes. Opportunities to realize savings already highlighted in strategic initiatives example in scaling up programs to remove human rights and gender related barriers, capacity building for procurement, Quality assurance and supply chain Strategic initiative.</p> <p>Joint GF and PEPFAR Country Dialogues to take preference and will be undertaken in the month of March.</p> <p>The country has explicit deadlines to deliver a FR Application. The dialogues will inform the processes of prioritization and budgeting.</p> <p>The FR Secretariat will tailor the agenda around the 13 HIV modules, and these will define the deliverables of the country dialogues.</p> <p>For HIV/TB/Malaria National Strategic Frameworks, the goal is to submit joint applications for HIV, TB and Malaria. This means that application for TB/HIV will be on Full review. Malaria's NSP is tailored and can also be opted in for a full review.</p> <p>The Consultants dealing on HIV programming to also include Key and Vulnerable Populations as part of his portfolio.</p> <p>PRs will be part of the FR Secretariat from the start of the writing process. They are key at providing the lessons learnt from the current and past funding processes. Their role is also critical in providing the responses to the TRP Comments.</p> <p>For the Evolution prioritised interventions, the process had already started and KCM was on track according to the road map. Process to be concluded in June. Based on previous experiences- the teams will move with speed and subsequently brief the KCM.</p> <p>The Management and Core teams handled all the slots with a delicate balance which ensured all groups some not previously involved were</p>	
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	<p>slotted in. this include Persons with disabilities, County teams etc. The teams tried to balance out the teams as much as possible.</p>	
<p>Min8/1/2/2023 Discuss the C19RM Portfolio optimization wave 2/next steps.</p>	<p>C19 Wave 1 and 2. (Annexed) Queries How does pandemic preparedness tie to the COVID 19 Funding?</p> <p>Discussion/Inputs The country's burn rate is very low. Clear strategies and focus need to be prioritised on fast moving areas/ activities.</p> <p>One consideration for the COVID 19 application is to address the adverse effects of COVID 19 example Gender based violence.</p> <p>KCM to provide guidance, on the gaps analysis, what is to be achieved/ goal to ensure utilization of the funding.</p> <p>Opportunity to place some of the funding on C19.</p> <p>Gaps table to be available as soon as possible to ensure that the team is able to</p>	<p>Decision 1</p> <p>KCM appreciated the Global fund for the consideration for additional Funding.</p> <p>Decision 2</p> <p>COVID 19 FR Writing Team to proceed with the application process.</p> <p>Proposed by Ms. Maureen Murenga</p> <p>Seconded by Mr. Douglas Bosire</p>
<p>Min4/1/2/2023 Review and confirmation of Minutes of the KCM Meeting held on 11th January,2023</p> <p>Min 6/1/1/2023 Discuss Kenya's, Allocation letter/Kick star Funding Request Application process.</p> <p>Min 7/1/1/2023 Discuss and Approve the Management Committee Report</p>	<p>Members were taken through the Minutes of the KCM meeting held virtually on 11th January 2023. The minutes were adopted as a true record of the days proceeding. The minutes were confirmed as: -</p> <p>Proposed by Mr. Latif Shaban Seconded by Ms. Pamela Kibunja</p> <p>Matters Arising Decision Point 1 The country registered for the 21st of August 2022 submission Window as Proposed by Dr. Ruth Masha Seconded by Ms. Maurine Murenga</p> <p>Decision Point 2 The KCM agreed to have a Funding Request core team of 8 members with representation from State, non-state actors and Development Partners, 3:3:2 slots were allocated respectively. The slots were to be filled within one week.</p>	<p>Decision point 1,2,3,4,5,6,7,8</p> <p>Funding Request Core team fully constituted.</p> <p>Joint Management and GC7 FR Core team held meetings on 3rd and 10th Feb,2023 and discussed TORs for the Core team, FR Secretariat and various stakeholders during FR Development process. Slots for secretariat and FR Road Map and budget discussed.</p> <p>To be presented to the</p>

<p>Min 8/1/2023 Discuss and Approve the Oversight Committee Report</p> <ul style="list-style-type: none"> Presentation by the Oversight Officer <p>Members were taken through the Oversight committee Report Highlights</p> <p>1. Grant Performance:</p>	<p>The Funding Request Secretariat was to be composed of 30 members. The slots for the writing team were to be discussed by the FR Core team and FR Secretariat and then presented to the KCM for approval.</p> <p>Decision point 3 The management Committee and core team to meet on 3rd February,2023 and unpack core issues i.e., propose the slots for an inclusive FR secretariat, TORs, Program splits, approach to the Country dialogue, role of various stakeholders during the writing process and present report /recommendation during the KCM Meeting on 16th February,2023.</p> <p>Decision point 4 After the KCM Meeting the Funding Request Core Team and the FR Secretariat was to meet and propose the writing team and develop a costed road map for the funding request application. The costed road map was to inform resource mobilization process.</p> <p>Decision point 5 The consultant's involvement needs to be defined. The Country Dialogue should take precedent and the consultants should come after the country has identified its needs and priorities.</p> <p>Decision point 6 Inclusivity is important. Teams should work together; components should speak to each other to achieve a people centred integrated systems for health and pandemic preparedness.</p> <p>Decision point 7 Members agreed that there was value in having the Existing PRs participate in the writing process especially in informing the Experiences and lessons learned in NFM 3</p> <p>Decision Point 8 Members joining the FR Secretariat to commit and not leave the writing process to the</p>	<p>KCM for approval on 16th February,2023</p> <p>Done</p> <p><i>Update on module completion: 11 members had completed all modules; 7 members had completed 1 module each; Some have started but not completed.</i></p> <p>PRs to implement</p>
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<p>July to September 2022 – Q5 (USD)</p> <p>2. Report: Targeted Oversight Visit to PRs</p> <p>Follow-up on previous OC recommendations</p> <p>3. Follow up on Concerns Raised on TLD (UCL)</p> <p>4. Action Points Following the 30th of November 2022 Meeting</p> <p><i>Mr. Philip Nyakwana-Member Oversight Committee appreciated the presentation made and further confirmed the findings reviewed and shared. He however requested that all action points are timed as populated in the Implementation tracker</i></p> <p>Min 9/1/2023 Ethics Committee Report.</p> <p>Members were taken through the Ethics Committee Report</p> <p>The Ethics officer presented the KCM Ethics Committee report detailing the onboarding of the ethics Officer, Ethics Plan of action and Implementation, Key Issues for KCM Follow-up and updates on OIG Related Issues. (Presentation Annexed)</p> <p><i>The Global fund Focal Person Ms. Cyrielle Mazzerelli appreciated the great work done around the ethics space and looked forward to further engagement in the new year.</i></p>	<p>Consultants.</p> <p>Decision point 9</p> <ul style="list-style-type: none"> • Management, Oversight and Ethics Committee reports was approved. • KCM Secretariat to share Targeted Oversight Field Visit Report with responsible entities to implement. • Members to prioritize completing the Ethics Modules by 31st January, 2023. Modules completion takes about 15 minutes. The modules are 8 in number taking a total of 2 hours. • The Link to the Ethics Modules to be re-shared with the KCM Members. <p>On completion of the modules, one is issued with a certificate.</p> <p>Decision point 10</p> <p>Having received the report on the previous day, The KCM agreed to review and discuss on the report during the next KCM Meeting. The KCM reminded TRCs to ensure timely submission of reports to be discussed by the KCM.</p> <p>The Non-state actors were in the process of concluding the nomination of the KCM Vice chair. Report to be presented during the next KCM Meeting.</p>	<p>Oversight field visit recommendations / fast tracks.</p>
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Members were informed that the KCM had received an evaluation report from the HIV TRC regarding the HIV Innovation Fund. Concern was raised on whether an Adhoc committee could review the Evaluation report instead.		Selection and endorsement of the KCM Vice Chair to be concluded during the KCM Meeting on 16 th February, 2023
Min10/1/2/2023 Selection and endorsement of the KCM Vice Chair	<p>Meeting acknowledged that the process to replace the current vice chair started last year.</p> <p>Meeting reminded that as per the KCM Constitution which states that: -</p> <p>The KCM Vice-Chair shall be elected from among nongovernment KCM Non-State Actors. Candidates for the Vice-Chair shall be proposed and seconded by KCM Non-State Actors. The Vice-Chair shall be elected by a simple majority vote of the KCM Non-State Actors. At least two-thirds of the KCM members must be present in the KCM meeting that endorses a Vice-Chair. The term of office for the Vice-Chair shall be two years from the date of election. The Vice-Chair shall serve for a maximum of two consecutive terms.</p>	<p>Decision 1 The KCM Non state actors to deliberate and finalize on the Vice Chair following the days meeting.</p> <p>Decision 2 The Chair of non-state to share the report once finalized.</p> <p>Decision 3 The New KCM Vice Chair to be endorsed in the next KCM Meeting.</p> <p>Proposed by: Ms. Faith Mwendu</p> <p>Seconded by: Ms. Rosemary Kasiba</p>
Min10/1/2/2023 AOB	<p>Meeting was informed that the Audit report was received from KANCO.</p> <p>COP process Starting today. Budgets received. Funding has remained relatively the same in this year. GF and COP 7 Teams to leverage on each other during the current FR Application.</p> <p>The outgoing vice chair appreciated support she had received from the KCM in its entirety and looked forward at supporting the new Vice Chair</p>	<p>Decision 1 To be deliberated in the next KCM meeting.</p> <p>KCM Requested that the GC7 GF and COP 23 planning team work jointly to ensure synergy</p>


Min11/1/2/2023 Closure

Being no other business, meeting closed with a word of prayer at 1.55pm.

Sign: 

Mr. Samuel Muia
KCM Coordinator

Date: 13/04/2023

Sign: 

Ms. Faith Ndungu
KCM Vice chair

Date: 13/4/2023