



**KENYA COORDINATING MECHANISM
OVERSIGHT COMMITTEE MEETING HELD VIA BLUE JEANS ON 15TH
SEPTEMBER 2020 BETWEEN 9.30AM AND 1.53PM**

Present

- | | |
|-------------------------|---------------------------------------|
| 1. Mr. Phillip Nyakwana | KCM Member-PLWD-OC-Chairing |
| 2. Mr. John Kihiu | member OC- Formal& Private sector |
| 3. Ms. Rose Kaberia | HIV ICC |
| 4. Ms. Hellen Gatakaa | Alt. Member-OC malaria ICC |
| 5. Ms. Trizar Alwar | Alternate OC-HIV ICC |
| 6. Ms. Caroline Olwande | Co-opted Member OC-UNAID |
| 7. Ms. Josephine Mwaura | KCM Oversight Officer –Taking Minutes |

In Attendance

- | | |
|--------------------------|-----------------|
| 1. Gloria Wandei | AMREF HA |
| 2. Eunice Omesa | TB ICC |
| 3. Dr. Peter Kimuu | TNT |
| 4. Ms. Emily Munga | KRCS |
| 5. Mr. David Muttu | KEMSA |
| 6. Dr. Elizabeth Onyango | Head TB Program |
| 7. Dr. Nazila Gantra | HSWC- Chair |
| 8. Ms. Margaret Ndubi | TNT |
| 9. Ms. Caroline Asin | GF-TB Program |
| 10. Mr. Victor Sumbi | Malaria ICC |
| 11. Mr. Patrick Igunza | AMREF |
| 12. Mr. Antony Miru | TNT |
| 13. Ms. Caroline Ngare | NACC-HIV ICC |
| 14. Ms. Margaret Mundia | KCM Secretariat |
| 15. Mr. Kevin Ogolla | KCM Secretariat |

Absent with Apologies

- | | |
|------------------------|---------------------------|
| 1. Mr. Samuel Muia | KCM Coordinator |
| 2. Ms. Medhin Tsehau | Multilaterals |
| 3. Mr. Bernhards Ogutu | Chair Oversight Committee |

Agenda

1. Introduction/Apologies
2. Opening Remarks by the Oversight Committee Chair
3. Declaration of Conflict of interest.

4. Presentation and Review of Dashboards /ICC Recommendations for period Nine (10 minutes per PR/grant including handover)
5. Update on implementation of GF C19 Support
6. Update on funding request submission
7. Confirmation of minutes of Oversight Committee Meeting held on 25th May,2020 and matters arising
8. A.O.B

Min 1/1/9/2020 Introduction /Apologies

Meeting was called to order at 9.30am. Opened with a word of prayer.

The oversight Officer quickly took members through the agenda of the day as outlined above. The agenda was adopted as

Proposed by: Mr. John Kihiu

Seconded by: Ms. Rose Kaberia

Apologies were registered as above

Min 2/1/9/2020 Opening Remarks by the Oversight Committee Chair

Members were invited into the days meeting. Mr. Phillip Nyakwana was requested to hold brief for the Oversight committee chair who was running late.

The Chair welcomed members to the meeting and requested themselves to introduce themselves reminding members to follow rules and guidelines set for the meeting.

Members were informed that the HIV ICC members nominated the following Members- Rose Kaberia-ITPC-EA and Alternate Member- Dr Trizer Alwar-UNICEF onto the oversight committee and both had accepted the nominations. The chair welcomed them on board.

Min 3/1/9/2020 Declaration of Conflict of interest.

No COI was declared

Min 4/1/9/2020 Presentation and Review of Dashboards /ICC Recommendations for period Nine (10 minutes per PR/grant including handover)

The Chair welcomed the PR representatives to present dashboards for the period April to June 2020 period (QUARTER 10). In their presentation, the PRs were able to elaborate on their programmatic, financial achievements, interagency Coordinating Committee (ICC) recommendations and oversight Committee decision/actions/requests. This is summarized in the table below

Principal Recipient	National Treasury			KRCS	AMREF HA	
Grant	HIV	TB	MALARIA	HIV	TB	MALARIA
Rating	A2	B1	B1	A2	B1	A2
Cumulative Budget	\$136,587,520	\$25,758,187	\$63,564,562	\$54,388,377	\$24,388,202	\$11,775,995
Cumulative Expenditure	\$47,398,520	\$20,799,603	\$13,033,418	\$44,820,085	\$18,016,691	\$9,693,299
Commitments	\$36,513,487	\$791,282.23	3,094,651.64	\$1,085,828	-	\$ 4.445
Absorption+ Commitments P8+ Expenditure	87.8%	95.5%	21%	84%	92%	82.4%

AMREF HA informed the meeting that it was working on a major reallocation request due to a funding gap. Proposed budget till the end of the grant was \$1,007,094. Forecasted savings as at 30th September were \$279,564 giving a funding gap of \$ 727,530.

The expenditures and commitments within the TNT TB Grant comprise of approximately \$3Million of pending bills from 2018/2019 FY will be covered in the coming grant. Hence available funding for this year shall be less commitments and obligations. The programs from MOH are largely to blame as they perennially cause delays in requests submissions

ICC recommendations

- KCM OC to follow up on letters copied to the KCM Chair by the counties requesting for extension of stipend payment of CHV incentives in 5 Counties (Kakamega, Homabay, Migori, Kisii and Nyamira) that are yet to take up payment.
- KCM OC to provide way forward on the Court ruling on testing by non-medical laboratory personnel
- KCM OC to follow-up with Global Fund for official communication on VAT threshold submitted
- On the information collected on PLHIV stigma index survey, it was noted that this was important in documentation of experiences of PLHIV, compare the situation of PLHIV,

measure changes over time and provide evidence base for policy changes and programmatic interventions. When the stigma index survey is completed then it will inform the final KCM decision on stigma related issues.

- On funds absorption, the NT and SRs to Fast track the Grant implementation to counter the implementation challenges that were experienced due to COVID-19 and KCM to Convene a meeting with KEMSA to ensure quick turnarounds in procurement to avoid delays in Payment and help expedite approval of KMIS at the PS level
- On Streamlining Malaria Commodities Pipeline to avoid Stockouts KCM was to help advocate for USAID's DCFA operationalization to resolve tax waiver of malaria commodities by escalating the issue to the highest authorities possible e,g PS,ALMA chair etc.
- KCM to endorse proposal by MHSWG to distribute LLINs that remains in mass net distribution to Elgeyo Marakwet due to emergent epidemiological trends.
- On indicator performance, CPF and Procurement to be fast tracked as well by the NT, MOH &KEMSA and identify measures to improve on the indicators that have gone down ie on pregnant women who know their HIV status, VMMC, PREP and HIV testing.
- KRCS to, Fast track grant implementation to cover for the lost time where possible/Re-allocate as per guidelines, Turkana AGYW Cash transfer GF Grant Project; Ensure smooth – of the CT to the county /social protection department to avoid ethical queries, Document and share with the ICC the key lessons learnt and achievements that would guide scale out to other counties as well as guide the focus of the new GF application -2021-2024. Indicate if there was notable decline in the HIV new infections and uptake of Health care services among the targeted AGYW.
- Disruption of activities within the TB program due to Covid disturbances realized savings of \$978,000. The TB HSWG hence requested for a facilitation of reallocation of these amounts to crucial program interventions hence improve service delivery and crucial programs that received underfunding.

Concerns raised include

- Blue Jeans app was not friendly to members and hence the chair recommended a change to a user-friendly app.
- Ms. Mundia- KCM Secretariat stated that queries for KEMSA and PMI issues should be addressed by KEMSA and TNT first before they are then presented to KCM for action. She asked that the issue on letters copied to KCM Chair should follow a route to the director of Preventive and promotive health as well as the HSWG chair who was present in the meeting. Asking ICC members to give additional information on their asks in order to help easy tracking.
- A request by the TB HSWG was to have the Human rights Committee on Gender experts be co- opted in the joint HRG committee of experts at NACC as this will allow for TB program to be comprehensively represented.

Discussions

In response, Mr. David Muttuu- Kemsas acknowledged the issues raised by Malaria HCWG by stating that some invoices had not been presented to TNT for payment as this would assist in funds

absorption of malaria commodities. He clarified that the issue was not procurement in nature but emanated from challenges in the in-country logistics where distribution happened in between the Covid-19 movement restrictions. The proof of delivery documents were then reconciled at a slow pace but should be already at TNT now noting that once payment for LLINs is done then absorption of malaria commodities will improve.

He clarified that the reason why RDTs were nonresponsive twice was not due to a procurement issue but multisectoral requirements like the RDT kits to be registered by WHO, validation and registration of kits by the KMLTLB, and evaluation based on GF compliance list. He confirmed that Kemsas had received clarification from the Malaria program that KMLTLB had completed its validation process and hence Kemsas was now in the process of advertising the tender for procurement of RDTs. All other delays in procurement of other consumables were occasioned by Covid related circumstances adding that Kemsas was however working overtime to ensure documents are prepared and presented to TNT in time.

The chair sought clarification on several issues, including what in country logistics affected the distribution of commodities, why the distributors are not able to issue support documents promptly and where the delay in payment was emanating from. He asked Kemsas to guide the Oversight Committee on where the problem really was to help the committee come up with suitable recommendations.

In response Mr. Mutuu stated that LLINs were imported from India following a competitive tender process who then appointed a local country to distribute the nets. This company did not have much experience in the current model hence tax waiver was not also acted upon early enough and Lessons learnt going forward is that for mass LLINs whatever company is nominated for clearing and distributing needs to have experience.

The chair cautioned the HSWG to take charge of their asks, make them specific and demonstrate how they have actioned them and not just leave everything to KCM. He added that the ICCs needed to also make some follow-up and give current status on past recommendations example a recommendation done in June should have current information status.

He asked members to understand the roles and responsibilities of different levels of KCM, ICCs and different programs as it is not the responsibility of KCM to follow up letters they are not aware of. Letters sent to the KCM Chair need to be copied to the secretariat for further action.

Mr. Miru stated that KMIS had not been conducted in 2017 and data that informed decision making was that of 2015. He added that approval for KMIS was already at the PS Level and the only ask was the KCM expedite the process as matter of urgency.

Dr. Kimuu clarified that the PMI has been a standing agenda since 2018 in most meetings he had attended. He reminded the PMI Group that PMI resulted from the Kenyan government and the USA government agreement through the USAID and does not fall within the GF grant. That PMI allocation covers Essential medicines (ECTs) which have been negatively impacted hence perennial stockouts. He asked the HSWG to rethink and strategize on how to streamline the three sources of resources from GOK, PMI and GF in the malaria program to find a permanent solution to the problem.

The chair clarified that the PMI was not a KCM issue, but KCM would offer support when required.

The secretariat noted that the request to have Human rights Committee on Gender experts be co-opted in the joint HRG committee of experts at NACC is not a KCM matter but guidance should be sought from NACC and MOH.

Dr. Caroline Olwande appreciated the presentations made which were informative and would guide the committee in decision making. She stated that the Oversight committee was strategic and would ensure that grants are implemented and followed up. She requested that before TRP is undertaken, the Oversight team needs to undertake a targeted oversight meeting or visit. She asked the Oversight committee and KCM secretariat to organize for a target oversight visit or oversight meeting within a planned week to help the country not lose further funding. These targeted meetings would then look at the grant in its entirety and not just snap shots; She recommended to KCM secretariat gives guidance on the timelines by which PRs can come up for reprogramming of funds so that the grants are fully utilized adding that Oversight committee needs to document all outstanding matters, identify issues highlighted in the last meeting, recommendations and actions taken and subsequent KCM guidance for optimal grant implementation.

Dr Alwar stated that a trend analysis is important so that action points are not missed out, in terms of clear issues highlighted in last meeting, bottle necks present and give direction on where the oversight committee needs to start. The Oversight committee to assess progress through graphic rather than tabulation may help assess progress.

Min 5/1/9/2020 Update on implementation of GF C19 Support (USD)

THE NATIONAL TREASURY AND PLANNING: -

HIV grant *Amount Approved* 3,747,783.22 *Amount Received/disbursed* 3,747,783.22 for Procurement of Gloves, Masks (N95 and Face mask 3ply), Alcohol based hand rub and disposable gloves TB grant *Amount Approved* 430,060.24 *Amount Received/disbursed* 430,060.24 0 N 95 Masks Malaria grant *Amount Approved*/1,000,000 *Amount Received/disbursed* 1,000,000 0 Disposable apron and face mask 3ply for Ongoing procurement, evaluation completed. Expected deliveries in December 2020 Beneficiaries Health care workers in all the 47 Counties from GOK, FBOs and NGO's. *Remark* The procurement is under review by the LFA before award of contract.

HIV grant *Amount Approved*/2,612,574.43 *items* COVID 19 Abbott test 105,600 Tests. *Timelines* COVID 19 Abbott test kits ready for shipment immediately. Beneficiaries National and Counties with Abbott equipment's for testing COVID 19. *Remarks* Shipment is ready for shipment however we are still waiting for general tax exemption at TNT. • See request from MOH letter dated 3rd August,2020. • MOH follow up this week and established that this request is at the Cabinet Secretary's Office National Treasury awaiting approval. • The product will be paid directly by the Global Fund in Geneva

On COVID 19 funding request

The National Treasury and planning HIV grant *amount Approved 5,826,924.00 Balance 5,826,924.00; items* Procurement of COVID 19 diagnostic kits and consumables *Timelines* To be procured through Wambo, UNICEF, WHO and KEMSA. Beneficiaries, National and Counties with the equipment for the reagents *Remarks* Procurement to be initiated after signing of implementation letter between TNT and GF.

HIV grant *amount approved 348,104.54 balance 348,104.54 items* to support infection prevention control (IPC) preparedness for school reopening *timelines for scheduled activities* To be conducted between October to December 2020 *Remarks* To be conducted once the implementation letter is signed between TNT and GF.

TB grant *amount approved 4,816,125 Amount received 4,816,125 items* Procurement of COVID 19 diagnostic kits and consumables Procurement initiated through Global Fund for Additional 158,200 automated tests and 150,000 manual tests for SARS-CoV-2 testing, *timelines for scheduled activities* to be procured through KEMSA. Beneficiaries National and Counties with the equipment for the reagents *Remarks* Procurement to be initiated after signing of implementation letter between TNT and GF.

Interventions to mitigate the effect of Covid 19 on HIV, TB and Malaria: -

The National Treasury HIV grant *amount approved 571,235.4 TB grant amount approved 232394.67; Malaria amount approved 46,042.72 items* Support activities to mitigate the effect of COVID 19 on HIV, TB and Malaria; *timelines for scheduled activities* Includes procurement of HIV self-test kits, support for lab staff, TB screening, Quality assurance for malaria and scale up of Ushauri platform. Beneficiaries, All 47 Counties; *Remarks* To be conducted once the implementation letter is signed between TNT and GF.

Amref Health Africa Implementation Status: Global Fund Covid 19 Support: -

Global Fund Malaria Grant *amount approved 223,781; Amount received 191,981 Balances 31,799; Items* Clean gloves (8,500 by 50), Masks (6,300 by 50) and Sanitizers (800 by 500ml) for 8300 CHVs and 1680 CHEWs, 11SRs targeting 2 officers per organization (1 program, 1 finance) and PR staff, and 15 PR staff. Counties: Homabay, Kisumu, Busia, Migori, Vihiga, Kakamega, Kisii, Nyamira, Bungoma & Siaya) in the lake Malaria endemic region. *Timelines for scheduled activities* An additional 1,500 Masks awaiting delivery by mid-September 2020 and subsequent distribution to CHVs.

Global Fund TB Grant *Amount Approved 217,596, Amount Received 110,889 balances 106,705 items* Procured and distributed Clean Gloves (3740 by 50 pieces), 3 ply surgical face masks (1545 by 50 pieces) and hand sanitizers (3720 of 500ml) and 48,000 reusable masks. • Printing of fliers and posters Supervisory support for county and subcounty • Sensitization of CHEWs and CHVs on COVID-19, GBV, Human rights issues *timelines for scheduled Activities* Sensitizations conducted in August and to be completed in September. Distributed PPEs in August to 47 counties through existing SRs

KRCS Implementation Status: Global Fund Covid 19 Support: -

GF *Amount Approved US \$ 4,731,510; Amount received US\$ 285,694 balance US \$ 4,445,816 items* 19442 Reusable masks procured and 4122 sanitizers procured and distributed to the CHVs

and Peer Educators in the 14 counties Implementation in 14 counties (Mombasa, Kwale, Kilifi, Nairobi, Machakos, Kajiado, Wajir, Garissa, Mandera, Kisumu, Siaya, Homabay, Busia, Kiambu - Sensitization of Community actors - sensitization of law enforcers and city askaris On GBV in relation to COVID 19 - Sensitization COVID 19 - Sensitization of Key population, people living with HIV and youth on COVID 19 Provision of food baskets to 1200 household - Linking approximately 200 vulnerable groups to food distribution in Mombasa county - Distribution of essential commodities including ARVs, condom, prep by community actors during lockdown of counties - Sensitization of religious leaders to reach to their congregation Total number of 84115 people reached though the different sensitization fora both virtually and physical *timelines for scheduled activities* Procurement of reusable masks, surgical masks and face shield worth Ksh 4,500,000 is expected to be delivered by latest 30th September 2020. All activities under the reprogramming will be finalized by 14th September 2020. Once received funds the remaining activities with the new money will be implemented till June 2021 *Remarks* Awaiting disbursement of the balances from GF that will be done quarterly till June 2021.

Min 6/1/9/2020 Update on funding request submission

The meeting was informed that the funding request was successfully on 31st August 2020 submitted to the GF. GF Access to funding and subsequent clarifications and guidance from the GF in the completeness checks have been responded to by the KCM promptly. The KCM continues to respond to all queries by the GF.

Discussions

Dr. Alwar sought clarification on how the KCM intended to address the current situation with PR selection.

KCM Member representing the formal and private sector clarified that according to the KCM meeting conducted from the previous day, guidance was given, and the country should feel comfortable and not arrayed in any way. That Kenya would not be losing any funds.

Ms. Ndumbi updated the meeting that the PRs had received the general tax exemption and were now applying for specific tax exemption on the abbot test kits. it was projected that the abbot kits would be received in the coming month. She stated that in addition to the notification letter there in need for a signed application letter under GF. She noted that under the TNT HIV grant they were still following up.

Min 7/1/9/2020 Confirmation of minutes of Oversight Committee Meeting held on 25th May,2020 and matters arising

The Oversight Officer took members through the minutes of meetings held on the 25th May 2020 and Matters Arising. Noting that these minutes were on an information basis as they had been adopted and transmitted to GF at the end of the financial Year.

Matters arising

Counties, MOH and PRs to work jointly to ensure that all CHVs/ health workers have been transitioned *update* Progress has been made for Transition of Global Fund staff. MOH is currently addressing issue

KEMSA to offer warehouse construction revised work plan factoring in new completion dates *update* KEMSA are invited to the days meeting and will be sharing an update of the same and revised dates for completion

KCM to convene a meeting between KEMSA and National Treasury and reevaluate bottle necks that result in delays in delivery of HIV, Malaria and TB commodities. A consultative meeting between KEMSA, TNT and programs to develop SOP to fast track delivery and payment of commodities. *update* Report was compiled on field visit to PRs. Oversight committee is currently following up on recommendations on implantation

Eligibility Performance Self-Assessment Report / CCM Performance Report 2019/2020 *update* Documents were discussed and circulated online for members to review.

Delays in issuance of Tax exemption approvals and waivers hence the goods take too long to be cleared *update* Presented to TNT on 3rd August 2020 on tax exemptions for commodities procured under GF. Request MOH approved the status

KCM intervenes to ensure that there is enough stock status for malaria commodity which were at stock status 0. *Update* KEMSA noted that Malaria Commodities contracted and delivered by end of May and June 2020. Delay was occasioned by the current Covid-19 pandemic.

The Kemsas representative could not be reached on the call. The chair guided the secretariat to reach out to Kemsas requesting for a progress report on the warehouse construction with new completion dates

Min 8/1/9/2020 AOB

The chair thanked members for their participation in the days meeting.

Being no other business, the meeting was closed at 1.53 pm with a word of prayer



Sign:
Mr. Samuel Muia: KCM Coordinator

21/01/2021

Date:



Sign:
Dr. Bernhards Ogutu - Chair Oversight Committee

Date: 31 March 2021