

Minutes of Oversight Committee Meeting  
December 8, 2017

INPUT FIELDS INDICATED BY YELLOW BOXES

MEETING DETAILS										
COUNTRY (CCM)			Pakistan				TOTAL NUMBER OF <u>VOTING</u> MEMBERS PRESENT		04	
MEETING NUMBER (if applicable)			04				(INCLUDING ALTERNATES)			
DATE (dd.mm.yy)			December 8, 2017				TOTAL NUMBER OF <u>NON-CCM</u> MEMBERS / OBSERVERS		15	
DETAILS OF PERSON WHO CHAIRED THE MEETING							PRESENT (INCLUDING CCM SECRETARIAT STAFF)			
HIS NAME & ORGANIZATION	First name		Dr. Muhammad Assai				QUORUM FOR MEETING WAS ACHIEVED (yes or no)		Yes	
	Family name		Ardakani				DURATION OF THE MEETING (in hours)		2	
	Organization		WHO				VENUE / LOCATION		CCM Secretariat	
HIS ROLE ON CCM (Place 'X' in the relevant box)	Chair						MEETING TYPE (Place 'X' in the relevant box)		Regular CCM meeting	
	Vice-Chair								Extraordinary meeting	
	CCM member		X (Chair OC)						Committee meeting	X
	Alternate								LFA	
HIS SECTOR* (Place 'X' in the relevant box)								GLOBAL SECRETARIAT / FUND LFA		
GOV	MLBL	NGO	EDU	PLWD	KAP	FBO	PS	ATTENDANCE AT THE MEETING		
	X							(Place 'X' in the relevant box)		
								OTHER		
								NONE		X

LEGEND FOR SECTOR*			
GOV	Government	PLWD	People Living with and/or Affected by the Three Diseases
MLBL	Multilateral and Bilateral Development Partners in Country	KAP	People Representing 'Key Affected Populations'
NGO	Non-Governmental & Community-Based Organizations	FBO	Religious / Faith-based Organizations
EDU	Academic / Educational Sector	PS	Private Sector / Professional Associations / Business Coalitions

SELECT A SUITABLE CATEGORY FOR EACH AGENDA ITEM  
(Place 'X' in the relevant box)

**GOVERNANCE OF THE CCM, PROPOSALS & GRANT MANAGEMENT RELATED TOPICS**

**AGENDA SUMMARY**

**AGENDA ITEM No.** WRITE THE TITLE OF EACH AGENDA ITEM / TOPIC BELOW

Review progress, decision points of last meeting – Summary Decisions	Review CCM annual work plans / budget	Conflict of interest / Mitigation	CCM member renewals/appointments	Constituencies engagement	CCM Communications with in-country stakeholders	Gender issues	Proposal development	PR / SR selection / assessment / issues	Grant Consolidation	Grant Negotiations / Agreement	Oversight (PUDRs, management actions, LEA debrief, audits)	Request for continued funding / periodic review / phase II / grant consolidation / closures	TA solicitation / progress	Other
AGENDA ITEM #1	Progress update on previous OC meeting Recommendations		X											
AGENDA ITEM #2	Update on Consultants Report of Independent TB Review													X
AGENDA ITEM #3	Status of Observers CCM – NIH and IOM													X
AGENDA ITEM #4	Election – Key Population													
AGENDA ITEM #5	Grant making - NACP									X				
AGENDA ITEM #6	Grant Making - NTP									X				
AGENDA ITEM #7	Update on HSS Grant													X
AGENDA ITEM #8	Update on latest Performance letters										X			
AGENDA ITEM #9	Discussion on Strategic developments, partnerships, opportunities, implementation and policy issues including, Risk Management and Sustainability										X			

To add another 'Agenda Item' highlight the entire row corresponding to the last 'Agenda Item #' in the table. Right click on the mouse and click on the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows.

**MINUTES OF EACH AGENDA ITEM**

**Proceedings:** The meeting started with recitation of Holy Quran. Chair, OC welcomed and thanked all the participants for sparing time to attend this meeting. He shared summary of agenda items and said that we shall be prepared and ready for the upcoming CCM meeting next week.

<b>AGENDA ITEM #1</b>	Progress update on previous OC meeting Recommendations
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
Yes	
<b>SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED</b>	
<p>CCM Coordinator shared the recommendations and progress made against each recommendation of previous OC meeting. He shared that 1<sup>st</sup> recommendation was "Technical and Financial Consultants will be housed in CCM Secretariat to compile the report, as per the timelines given in inception report", he said as per recommendation, the consultants housed in CCM Secretariat and completed the report. He added that CT was consulted on the second recommendation i.e. CCM Secretariat will approach Global Fund regarding alignment of dashboard for reporting on six monthly basis. After aligning the Dashboard, GF will be requested to provide TA to run a refresher course. He said that CT suggested that PRs shall continue on the same dashboard and shall club the progress of two quarters for dashboard. CCM Coordinator said that third recommendation was related to the PRs i.e. CCM Secretariat will approach Global Fund regarding alignment of dashboard for reporting on six monthly basis. After aligning the Dashboard, GF will be requested to provide TA to run a refresher course, PRs will update the OC in next phase of the same meeting. He said that fourth and last recommendation was "A high level delegation to approach Govt of Punjab to resolve the issues pertaining to provision of services to HIV positive community". He said this has to be updated by NACP.</p> <p>Chair added that we need to meet Minister, NHR&amp;C and need to take on board other related ministers to address the issues in Punjab, he added that CM, Punjab is committed and keen to do the all good work for people of Punjab. He said that if there are 50% of cases of HIV in Punjab, it is not stigma for Punjab; they need to understand that 50% of population of the country is residing in Punjab. He said our key populations are not going to take radio and TV to see preventive messages; we need to be innovative approaches to reach these populations. Dr. Kulsoom added that due to numerous political issues and barriers to resolve the issues. Mr. Satti that since July 2016, the issues started in Punjab and in spite all our efforts, Punjab could not resolve and sustained the services. He added that CCM is witnessed that I have raised voice on all the forum of OC and CCM to resolve the issues but it did not work and now I am afraid that next grant will also suffer. He said that a senior level meeting of UNAIDS, NACP, Association of PLHIV was held with PACP and everything was agreed in papers but nothing happened in practical. Dr. Sajid seconded Mr. Satti and said that there was no follow up of that meeting. Chair said that we need clear strategy to address to meet the CM, Punjab to address the issues. Chair said that we require a two-three day consultation with all the top level management to bring everybody on board.</p>	
<b>AGENDA ITEM #2</b>	Update on Consultants Report of Independent TB Review
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
Yes	

<b>SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED</b>	
Chair, OC shared that draft reports shared by both Consultants were reviewed by UNAIDS and WHO in line with the agreed ToRs and feed was given accordingly. He said that the report was shared with all the stakeholders for their review, however, no feedback was received. He added that same may be shared with Ministry of NHR&C for further direction.	
<b>AGENDA ITEM #3</b>	Status of Observers CCM – NIH and IOM
<b>CONFLICT OF INTEREST.</b> (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
<b>WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)&gt;</b>	
Yes	
<b>SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED</b>	
Dr. Sajid shared that National Institute of Health, Islamabad (NIH) and International Organization for Migration (IOM) have approached CCM Secretariat for granting the observer status in CCM. He said that having both these organizations as observers will benefit CCM. Members agreed to recommend NIH and IOM as observers, CCM.	
Mr. Satti said that we need some representation from Ministry of Interior as the key populations are facing numerous problems. Chair asked him that can he specify which section is to be approached, as there are many sections in Mol. CCM Coordinator informed that CCM secretariat approached Mol earlier and despite follow up, there was no response.	
<b>AGENDA ITEM #4</b>	Election – Key Population
<b>CONFLICT OF INTEREST.</b> (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
<b>WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)&gt;</b>	
Yes	
<b>SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED</b>	
+	
<b>AGENDA ITEM #5</b>	Grant making – NACP
<b>CONFLICT OF INTEREST.</b> (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
<b>WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)&gt;</b>	
Yes	
<b>SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED</b>	
Dr. Quaid Saeed, SPO, NACP updated the house that grant making process with both the HIV/AIDS PRs was successfully completed and submitted to Global Fund for final approval. It is expected that final approval from GAC will be awarded in a day or two. He said that first time NACP will provide preventive services to the key population for prevention of HIV/AIDS in the country with global fund support. He said that in the FR, CHBC interventions have be not included, however, key populations have been given due consideration for care and support services. He further said that in the new	

funding request NACP will initially take over the cost of human resource of MSM regional grant and then the cost of all the interventions.

He also shared that they are still facing problems in implementation in Punjab, NACP released an amount of Rs. 1.3 million to PACP in July 2016 which has not been utilized yet. Mr. Satti added that positive community is suffering badly due to close down of care and support services in Punjab and we need a high level interference for continuation of life line services for positive people. He also highlighted the problems being faced regarding common unit and said that there is no clarity on the subject from any quarter. An extension for Human Resource should be sought from GF to complete the close out and carry out recruitment for the unit.

Chair added that we need to meet Chief Minister Punjab for immediate solution of these issues being faced in Implementation of HIV/AIDS grant.

<b>AGENDA ITEM #6</b>	Grant making – NTP
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CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

NONE

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	Yes
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**SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED**

Dr. Hadi and Dr. Furqan jointly shared the progress on the agenda item. It was informed that Review and Assessment of PUDR by the LFA has been completed. There were certain queries by LFA, response to LFA queries/clarifications & additional documents submitted accordingly. Moreover, responses to TRP clarifications have been submitted. Grant negotiations process was completed in November 2017.

It was shared that development of key grant documents, including the Performance Framework, a detailed Budget and a list of Health Products, Implementation Mapping & Schedule-1 are finalized. It was further said that PTP SRs are engaged directly with CT and were part of all the grant negotiation process. Dr. Furqan requested that CCM ensures a TA from GF for development of PC-1s of the PTPs for partners like Stop TB Partnership which will also ensure timely releases, PR will engage PTPs to develop risk mitigation plan for it.

Chair asked that have you considered the TB FR Consultants report during the grant making process as the report was shared while the country team was present in Pakistan for grant making process. Dr. Furqan responded that by the time report was shared, the grant making process had been completed. Dr. Sajid said that the report was received very late from the consultants, much behind the deadline agreed, but still, the same was shared during the grant negotiations, when the CT was in the country.

Dr. Nauman said that the recommendations of the report were very generic and most of the processes were already completed.

<b>AGENDA ITEM #7</b>	Update on HSS Grant
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CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

NONE	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
Yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<p>Dr. Hassan presented the progress update of HSS grant being implemented by Ministry of NHR&amp;C. He said that negotiations are underway with DRAP for Training on Pharmacovigilance, Drug Dossier Evaluation, Drug Quality Assurance, Post Market Surveillance and Software for Drug Control Administration, however, budget and work plan will be finalized next week. He further updated that Land has been allocated and demarcation is completed, NESPAK is developing structural &amp; architectural design and BOQs process is started on 1<sup>st</sup> Dec and they will finalize the report in 90 days. He said the hiring of the construction firm to start work right after submission of structural &amp; architectural design BOQs by NESPAK. He shared that TA has to be floated for Technical Assistance - Review and development of roadmap for coordination bodies and integration. He also added that ToRs have been finalized for Technology assessment for national and provincial hospitals.</p> <p>Chair asked about the integration process. Dr. Hassan responded that all the MIS being utilized previously will be integrated in one format for efficient reporting.</p>	
<b>AGENDA ITEM #8</b>	Update on latest performance letters
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
Yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
Majority of the PRs shared that they did not receive any performance letter(s) during the reporting period. Others, who have received performance letters, have addressed the concerns raised by GF.	
<b>AGENDA ITEM #9</b>	Discussion on Strategic developments, partnerships, opportunities, implementation and policy issues including, Risk Management and Sustainability
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
NONE	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>	
Yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<p>Dr. Sajid introduced the agenda point and said that it gives an opportunity to all of us to raise our concerns and issues on this forum. He added that, we will be discussing the strategic developments, partnerships, opportunities, implementation and policy issues including, Risk Management and Sustainability. PRs are welcome to discuss future strategies/vision, gaps and strengths of the implementation, they can share their learning of previous project designs and how can we help to improve that.</p> <p>Chair asked all the PRs to share any such concerns/issues with the house. None of the PRs gave any input.</p> <p>The meeting ended with a vote of thanks by the Chair OC.</p>	
DECISION(S) Summarize the decision in the section below	

- 1) CCM Secretariat will share the Consultants TB Funding Request Report with Ministry of NHR&C for further direction.
- 2) Observer status for National Institute of Health (NIH)& International Organization for Migration (IOM)
- 3) CCM Secretariat will develop ToRs for holding Election for TG and will share with OC members for review/inputs
- 4) In order to understand the true spirit of integration, a One day consultation involving all the stakeholders should be held.
- 5) Meeting with Chief Minister Punjab to resolve the issues with Provincial AIDS Control Program
- 6) Approach GF for granting extension to human resource of the three programs to complete the close out requirements

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE
ANY OTHER POINT	KEY PERSON RESPONSIBLE	DUE DATE

DECISION MAKING				
MODE OF DECISION MAKING	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS	
(Place 'X' in the relevant box)	VOTING		VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS

**NEXT MEETING (INCLUDES OUTSTANDING AGENDA ITEMS NOT COMPLETED DURING CURRENT MEETING)**

TIME, DATE, VENUE OF NEXT MEETING (dd.mm.yy)	Next OC meeting will be held in first quarter 2018. Exact date and agenda will be communicated later.
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PROPOSED AGENDA FOR NEXT MEETING	WRITE THE PROPOSED AGENDA ITEMS IN THE SPACES PROVIDED
AGENDA ITEM #1	AGENDA WILL BE FINALIZED LATER
AGENDA ITEM #2	
AGENDA ITEM #3	

**GLOSSARY FOR ACRONYMS USED IN THE MINUTES:**

ACROYNM	MEANING
OC	Oversight Committee
KP	Khyber Pakhtoonkhwa
C o I	Conflict of Interest
HPSIU	Health Planning System Strengthening Information Analysis Unit



HSS	Health Systems Strengthening
PR	Principal Recipient
NHSR&C	Ministry of National Health Services, Regulations and Coordination
SR	Sub Recipient
NPM	National Program Manager
NTP	National TB Control Program
DoMC	Directorate of Malaria Control
NACP	National AIDS Control Program
SDGs	Sustainable Development Goals
PATA	Pakistan Anti TB Association
CSOs	Civil Society Organizations
EPA	Eligibility and Performance Assessment
ERs	Eligibility Requirements

To add another 'Agenda Item' highlight the entire row corresponding to the last 'Agenda Item #' in the table. Right click on the mouse and select the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows.

SUPPORTING DOCUMENTATION	Place an 'X' in the appropriate box	
	Yes	No
ANNEXES ATTACHED TO THE MEETING MINUTES		
ATTENDANCE LIST	X	
AGENDA	X	
Presentation	X	
IF 'OTHER', PLEASE LIST BELOW:		

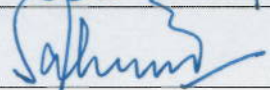
**CHECKLIST (Place 'X' in the relevant box)**

	YES	NO	
AGENDA CIRCULATED ON TIME BEFORE MEETING DATE	x		The agenda of the meeting was circulated to all CCM members, Alternates and Non-CCM members <u>2 weeks</u> before the meeting took place.
ATTENDANCE SHEET COMPLETED	x		An attendance sheet was completed by all CCM members, Alternates, and Non-CCM members present at the meeting.
DISTRIBUTION OF MINUTES WITHIN ONE WEEK OF MEETING	x		Meeting minutes should be circulated to all CCM members, Alternates and non-members within <u>1 week</u> of the meeting for their comments, feedback.
FEEDBACK INCORPORATED INTO MINUTES, REVISED MINUTES ENDORSED BY CCM MEMBERS*	x		Feedback incorporated into revised CCM minutes, minutes electronically endorsed by CCM members, Alternates and non-members who attended the meeting.



MINUTES DISTRIBUTED TO CCM MEMBERS, ALTERNATES AND NON-MEMBERS	x	Final version of the CCM minutes distributed to CCM members, Alternates and Non-members and posted on the CCM's website where applicable within <u>30 days</u> of endorsement.
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\* Often CCM minutes are approved at the next meeting. Since many months can pass before the next scheduled meeting, electronic endorsement of the CCM minutes is considered to be a more efficient method for effective meeting management.

<b>MINUTES PREPARED BY:</b>			
TYPE / PRINT NAME >	Dr. Sajid Ahmad	DATE >	13 <sup>th</sup> Dec 2017
FUNCTION>	CCM Coordinator	SIGNATURE >	

<b>CCM MINUTES APPROVAL:</b>			
APPROVED BY (NAME) >	Dr. Muhammad Assai Ardakani, WR WHO	DATE >	13/12/17
Chair Oversight Committee		SIGNATURE >	