



**NFM MALARIA PROJECT BOARD – QUARTERLY REVIEW (Q3)
MEETING MINUTES**

Date: Wednesday October 12, 2016

Time: 09:30-11:00

Place: 5th Floor, UNDP Conference Room, UN House Guinea Bissau

Meeting Participants:

1. Ilda Mateus dos Santos	Director CG-PNDS	MINISAP
2. Paulo Djata	Coordinator PNLP	MINISAP
3. Mamadu Camara	M&E, PNLP	MINISAP
4. Aliu Mane	Prevention, PNLP	MINISAP
5. Jaime Natchare	Logistician, PNLP	MINISAP
6. Fernando Agostino	Prevention CG-PNDS	MINISAP
7. Bicamata Na Dum	Finance	MINISAP
8. Sofia Oliviera	M&E INASA	INASA
9. Andrea Speranza	Coordinator	AIFO
10. Joao Cabral	HOM Assistant	MSF Spain
11. Ja Dranka Monica	HIV Specialist	UNICEF
12. Jean Claude Mubalana	Health Section Chief	UNICEF
13. Joshua Galjour	FPM	GFTAM
14. Elisa Rivira	Senior Programme Officer	GFTAM
15. Moussa Fofana	Finance	LFA
16. Emile Dedomey	M&E	LFA
17. Saliu Ba	President	CCM
18. Abudulai Rodriguez	Rep. SIS	INASA
19. Isabel Almeida	NPO	UNPA
20. George Ionita	Project Manager	UNDP
21. Antoine Fadoul	PSM Specialist	UNDP
22. Francis Bogie Boogere	Project Associate/P	UNDP
23. Zaina Kadah	Procurement Specialist	UNDP
24. Harison Rabemanisa	Finance Specialist	UNDP
25. Sumaila Carlvaho	M&E Analyst	UNDP
26. Victor Pereira	M&E Analyst	UNDP
27. Adulai Rodriguez	In Charge SIS	INASA
28. Jovens Isabel Almeida	NPO	UNFPA
29. Horacio Semedo	Data Analyst	INASA

Agenda

- Communication from the Global Fund Team
- NFM Malaria Project Implementation Update
- Presentation of the preliminary results on the implementation of seasonal malaria chemoprevention activities
- Presentation of the PSM Plans
- AOB

1. Communication from the Global Fund Team

Under the new financing model, a total of EUR 38.1 million was allocated to Guinea-Bissau. To date, three grants have been signed and funds disbursed to the principal recipients. This includes funds for the NFM Malaria grant managed by UNDP, which has a health system strengthening component (HSS); the NFM Tuberculosis grant that started July 1, 2016 with the Ministry of Public Health / CG-PNDS as the principal Recipient. The NFM/ HIV / AIDS grant, which also has a HSS component, was submitted to the GAC-2 (Grant Approval Committee) in September 2016 and the decision was made in October 2016.

For Guinea-Bissau, all NFM grants will be coming to an end in December 2017. It is important to note that the unspent funds from NFM grants cannot be used beyond 31 December 2017. This means that the Government of Guinea-Bissau and its partners will have to plan to submit funding requests for all three diseases to access the 2018 to 2020 allocation in the first window of 2017 (March 2017), in order to avoid an implementation gap between the end of the NFM grants and the start of the new grants under the new allocation.

Mr. Joshua Galjour, the Country Portfolio Manager informed participants that in the second week of December 2016, the Global Fund will inform the Country Coordinating Mechanism the amount that will be made available in 2018 funding cycle. Each principal recipient should respect periodic reporting on the progress of both the implementation and the achievement of the pre-established objectives / deliverables from the funds disbursed. The next funding cycle will be for 3 years from 2018 – 2020.

Before the submission of a formal call for proposals, it is important that the country makes a timely analysis on what has been achieved under the current grant funding, epidemiological trends and the most viable implementation strategy. It will be unfortunate if information is sought only after the call has been officially announced. It is anticipated that a special call will be prepared to address contexts specific to Guinea Bissau and Cape Verde.

2. Update on the progress made in the Implementation of the Malaria Grant

Mr. George Ionita, Project Coordinator UNDP PMU, presented a summary of current progress of the NFM Malaria grant and other key project milestones. Within this NFM Malaria Project implementation of the health Systems Strengthening component has become part of an integrated Country plan that has secured contributions from Key donors within health Sector. Health and Community Systems Strengthening (HCSS) has expanded in scope beyond what was planned within the aforesaid grant. It now includes contributions from the GF NFM TB and HIV grants plus inputs from other resident UN Agencies (UNICEF, WHO, UNFPA). In addition, through UNDP's coordination and lobbying efforts HCSS has secured contribution from GAVI Alliance and EU (European Union).

Concerning the *incentives to government staff*, UNDP's policies do not allow incentives on civil servants' salaries, a special approval is now being requested by the Country Office from UNDP HQ Administrator.

Seasonal Malaria Chemoprophylaxis (QPS): the ministry decided to use the strategy developed by the MSF. There is no nationally approved strategy for Seasonal Malaria Chemoprophylaxis. MSF is working in Bafatá, while the NFM Malaria project covers Gabu, however there is a notable increase in the number of cases above what was initially planned. Most of the forecasts relied on NGO and health Facility based data since no population survey was conducted before the intervention.

2.1 Discussions:

Dr. Antoine Fadoul, PSM Specialist UNDP GF PMU was concerned about the current level of progress and asked if an extension period will be allowed to finalize critical project activities. Dr. Joshua Galjour responded that extensions involve a lot of administrative work and require the approval of the Global Fund HQ board of directors. On a special note extensions will not be negotiated for grants expiring at the end of 2017. Mr. Emile Dedomey, LFA Programme Expert / M & E, inquired about the status of the studies planned before 2017. In addition he was not satisfied with the available SMC results in the two target regions (Gabu and Bafata), in his opinion, the activity had not achieved its objectives. In response to the first question, UNDP / GF M & E Officer Sumaila Carvalho reported that PMU is in contact with the responsible institutions (INASA and PSB) and the said studies are underway. PSB (Projet Santé Bandim) submitted the study protocol on therapeutic efficacy of ACT and SP to NMCP and UNDP for review. In response to the concern raised on the QPS/SMC results, UNDP / GF M & E officer Victor Pereira explained that available results do not entirely represent the two regions, only 14 health Centers in Gabu and 7 in Bafatá were covered.

3. Payment of incentives to Sub Recipients.

The Country Portfolio Manager Dr. Joshua Galjour informed participants that from January 1, 2018 Global Fund will no longer pay for incentives. The policy has been specially approved by the CCM, will only be implemented during the requested period (2016-2018)

Zero Cash Policy legal

The PR must submit in time a list of activities that will require GF's approval for the implementation of (0) Cash.

Diversion of ACT funded by the Global Fund into private Pharmacies

The Global fund advocates for zero tolerance in respect to the sale of products that are provided free of charge to countries under a grant agreement similar to the one signed with the Government of Guinea-Bissau. This practice does not only represent a financial loss for the programs funded by the Global Fund but equally poses a potential health risk to the population. He informed participants that in some countries where the sale of Global Fund medicines was reported, grants were suspended. The purpose is to have medicines available free to the vulnerable and poor population. Private sales deviate from this purpose. Global Fund investments are meant to serve the population in the most effective manner. The Global Fund is equally concerned with related reports of the stock-out of ACT at the HNSM.

Discussions:

Regarding the diversion of Malaria drugs, the Coordinator of the Malaria Control Program (PNLP) Dr. Paulo Djata informed participants that the Ministry of Health had opened an investigation which is still in process. Once the report is finalized it will provide a diagnosis and the required course of action. Concerning reports of stock-outs of ACT, the Malaria Program Coordinator reported that no information had been shared by the NGO AIDA on the distribution of malaria drugs. The National Program considers it a service breakdown when no components of the product are available. According to Dr. Djata, it is necessary to

have information of how AIDA classified stock outs. The representative of AIDA, Mr. Victor Madrigal, highlighted the importance of the continuity of supply of ACT by the Global Fund given the present socio-economic situation in the country. In response to Dr. Djata's concern, Mr. Madrigal said that AIDA actually did not share the data for reasons related to work overload that the institution is facing. However, information is available at AIDA for all malaria control stakeholders. Finally, he expressed concern about the reliability of HNSM laboratory data. Dr. Ilda Mateus, Director of CG-PNDS took the opportunity to inform participants that the HSS plan is being finalized and should be submitted very soon.

NFM Malaria - Q3 Project Board / Meeting with Partners

SN	Organization	Dept	Name	Surname	Function	Signature
1	MINSAP	MINSAP	Dr. Nicolau	Almeinda	DG Prevention	
2	MINSAP	MINSAP	Dr. Vany	Moreira	DGASS	
3	MINSAP	PNDS-CG	Dr. Ilda Mateus	Dos Santos	Coordinator	
4	MINSAP	PNLP	Dr. Paulo	Djata	Coordinator	
5	MINSAP	PNLP	Mamadu	Camara	M&E	
6	MINSAP	PNLP	Aliu	Mane	Prevention	
7	MINSAP	PNLP	Jaime	Natchare	Logistician	
8	MINSAP	PNDS-CG	Cunhate	Na Bangna	M&E	
9	MINSAP	PNDS-CG	Fernando	Agostinho	Prevention	
10	MINSAP	PNDS-CG	Bicamtala	Na Dum	Finance	
11	MINSAP	CECOME	Dr. Dulia	Barbosa	Diretor Geral, ai	
12	MINSAP	INASA	Sofia	Oliveira	M&E	Sofia de Oliveira
13	MINSAP	INASA / PS Bandim	Dr. Amabelia	Rodrigues	Director	
14	MINSAP	INASA / PS Bandim	Cesario	Martins		
15	AIFO		Andrea	Speranza	Coordinator	
16	MSF Spain		Joao	Cabral	HOM Assistant	
17	UNFPA	Health	Jadranke	Municia	HN Spec	
18	UNICEF	Health	Jean-claude	MUSALANA	chief section	
19	WHO					
20	GF CT		Joshua	Galjour	FPM	
21	GF CT		Elisa	Rivera	Senior Prog Officer	
22	LFA		Moussa	Fofana	Finance	
23	LFA		Emile	Dedomey	M&E	
24	CCM		Saliu	Ba	President CCM	
25	UNDP	PMU	George	Ionita	Project Manager	
26	UNDP	PMU	Francis	Boogere	Project Associate	
27	UNDP	PMU	Antoine	Fadoul	PSM Specialist	
28	UNDP	PMU	Zaina	Kadah	Proc Specialist	
29	UNDP	PMU	Amilcar	Vieira	Proc Associate	
30	UNDP	PMU	Joao	Conaranco	Logistician	
31	UNDP	PMU	Rosine	Simpa	Logistician	
32	UNDP	PMU	Djenabu	Djalo	Logistician	
33	UNDP	PMU	Harison	Rabemanisa	Finance Specialist	
34	UNDP	PMU	Ibrahima	Gueye	Gest Finance	
35	UNDP	PMU	Cherno	Balde	Finance Analyst	
36	UNDP	PMU	Mali	Balde	Finance Analyst	
37	UNDP	PMU	Sumaila	Carvalho	M&E Associate	
38	UNDP	PMU	Victor	Pereira	M&E Associate	
39	INASA		Adulais Rodriguez	Rodriguez	Resp. SIS	
40	INASA		Horacio Semedo	Semedo	Gestor de dados	Horacio Semedo
41	PNLP		Zaina K	Kadah	Procurement specialist	
42	UN FPA	JUVENS e VIH	ISABEL	ALMEIDA	NPO	

13 INASA
UNICEF

Amiel Izaguirre
Jadranke Muniz
Smarante Falcao

teo. Est.
HN specialist
PNLP

Julia
Julia

