

**Subject: Minutes of 89<sup>th</sup> meeting of India CCM**

Date	14 <sup>th</sup> August 2023
Venue of the Meeting	155-A, Nirman Bhawan 1st Floor Committee Room, Ministry of Health and Family Welfare, Nirman Bhawan, New Delhi
Meeting started	14:30 PM
Meeting adjourned	16:00 PM
Meeting Chaired by	Sh. Sudhansh Pant, Secretary (Health)/ Chair, India CCM
Total Number of Participants	<b>45</b>
Did the meeting attained quorum	Yes
Did the meeting have any conflict of interest	No, Adequate measures to mitigate Conflict of Interest were taken during the meeting.
Meeting attendance	Country Coordinating Mechanism (CCM) Member: (Physically Present: 05) and Virtually Present: 13) ▪Alternate Member:(Physically Present: 0 and Virtually Present:15) ▪ Special Invitees: 09 (Physically Present: 05 And Virtually Present:04) Country Coordinating Mechanism Secretariat: (Physically Present:03)
Attendance list	Yes <b>Annexure-1</b>

89<sup>th</sup> meeting of India CCM was conducted on 14<sup>th</sup> August 2023 at 14:30 PM under the Chairmanship of Sh. Sudhansh Pant, Secretary (HFW)/Chair India CCM in Room No. 155-A, Nirman Bhawan.

Translation of key discussion points and decisions was provided in Hindi for the benefit of the civil society, community and persons living with disease constituency members.

Shri Sudhansh Pant, Secretary HFW was introduced and warmly welcomed into the role of Chairperson of India Country Coordinating Mechanism for the Global Fund and a brief background on the Global Fund, ICCM composition and its activities were presented to provide context prior to agenda wise discussions for the Chairperson.

Vice chairperson and all members and alternate members were also warmly welcomed.

In his opening remarks, Secretary (HFW), Govt of India expressed his pleasure at attending the first meeting of India CCM as Chair, India CCM. He said that the CCM will continue to meet regularly as required and that India CCM continues to take positive decisions in the interest of running the disease specific programmes effectively in the country.

### **Agenda Item No. 1: Endorsement of minutes of 88<sup>th</sup> India CCM meeting.**

It was informed by Dr Shobini Rajan – Focal point (India CCM) that there were no inputs received upon circulating the minutes right after the 88<sup>th</sup> meeting or again prior to 89<sup>th</sup> meeting.

It was indicated that there was no pending action considering that the activity of CCM evolution threshold is completed and the previously endorsed funding request proposal was not submitted in the window of 29<sup>th</sup> May 2023 necessitating reworking the proposal, which is placed in the agenda of present meeting. Mail received from CCM hub regarding Evolution threshold completion is placed at **Annexure-2**

The minutes of the 88<sup>th</sup> India CCM Meeting were unanimously endorsed by India CCM and may be seen at **Annexure -3.**

### **Agenda Item No. 2: Update on recommendations by Screening Committee for shortlisting of Non- Government Principal Recipients and submission of India's Funding Request Proposal for Global Fund grant period 2024-27 and endorsement by India CCM for submission to the Global Fund by 21st August 2023.**

#### **Discussion Points:**

- India CCM Focal point made a presentation placed at **Annexure- 4** on the revised process followed for the shortlisting of Non Government Principal Recipients for Global Fund Grant period 2024-27 by the Screening Committee set up under the chairpersonship of Director General Health Services and provided a summary of recommendations based on the Screening Committee report placed at **Annexure- 5**
- The Screening Committee recommended the following 14 organizations shortlisted to be non government as detailed below:

SI No	Name of the Organization
1	Karnataka Health Promotion Trust (KHPT)

2	India HIV AIDS Alliance (IHAA)
3	The UNION
4	Tata Institute of Social Sciences (TISS)
5	YR Gaitonde Centre for AIDS Research and Education (YRGCARE)
6	Transport Corporation of India Foundation (TCIF)
7	India Health Action Trust (IHAT)
8	FIND
9	Solidarity and Action Against The HIV Infection in India (SAATHII)
10	Hindustan Latex Family Planning Promotion Trust (HLFPPT)
11	PLAN India
12	William J Clinton Foundation WJCF
13	Project Concern India (PCI)
14	DOCTORS FOR YOU

- For each of the programmes, the proposals that are shortlisted are as given below:

**1. TB:**

SI No	Name of the Organization
1	Karnataka Health Promotion Trust (KHPT)
2	The UNION-TB
3	Tata Institute of Social Sciences (TISS)
4	FIND-TB
5	Solidarity and Action Against The HIV Infection in India (SAATHII)-TB
6	Hindustan Latex Family Planning Promotion Trust (HLFPPT)-TB
7	PLAN India-TB1
8	PLAN India TB-2

9	William J Clinton Foundation WJCF
10	DOCTORS FOR YOU

## 2. HIV:

SI No	Name of the Organization
1	India HIV AIDS Alliance (IHAA)
2	The UNION-HIV
3	YR Gaitonde Centre for AIDS Research and Education (YRGCARE)
4	Transport Corporation of India Foundation (TCIF)-HIV 1
5	Transport Corporation of India Foundation (TCIF)-HIV 2
6	India Health Action Trust (IHAT)
7	FIND-HIV
8	Solidarity and Action Against The HIV Infection in India (SAATHII)
9	Hindustan Latex Family Planning Promotion Trust (HLFPPT)-HIV 1
10	Hindustan Latex Family Planning Promotion Trust (HLFPPT)-HIV2
11	PLAN India- HIV 1
12	PLAN India- HIV 2
13	William J Clinton Foundation WJCF-HIV

## 3. Malaria:

SI No	Name of the Organization
1	Transport Corporation of India Foundation (TCIF)
2	PLAN India
3	William J Clinton Foundation WJCF
4	Project Concern India (PCI)

- Dr Atul Goel, DGHS (as Chairperson of the Screening Committee) and also member of India CCM reiterated that the process was open and transparent and adequate efforts were undertaken to identify Indian organizations with capacities to be NGPR.
- It was informed that while UNOPS was considered as provisionally eligible to be a NGPR based on the Global Fund guidelines that UN agencies can be considered as NGPR if adequate organizations are not available with countries. Since that is not the case in India, the proposals of UNOPS were not further examined or scored.
- The additional recommendations of the Screening Committee are summarized below:
  - Performance and Impact assessment of NGPRs may be incorporated by the Programme Divisions to be included as a mid term exercise in the upcoming grant period, since such a mechanism does not exist currently.
  - It should be flagged to the ICCM that due consideration be given by selected PRs to engage indigenous organizations which had applied for PR-ship but could not qualify the financial or technical criteria but have good working experience at the field level as SRs and SSRs.
  - It was strongly recommended to build more enabling conditions for more indigenous organizations to become SRs and SSRs of selected PRs which will also enable the capacity building of such organizations.
  - In addition, more involvement of communities and community based organizations especially in the field of TB for SRs and SSRs should be undertaken so that it will aid in their capacity building.
  - In light of fewer NG PR for Malaria, the selected PRs of HIV and TB may be encouraged to expand their scope of work and also submit proposals for Malaria as per programme needs for future.
  - It may be duly deliberated and discussed with the Global Fund to bring down the financial criteria for selection of non Government Principal Recipients from 10 mUSD to 5 mUSD for the next round of grant cycle.
- Detailed presentations were made by TB, HIV and Malaria programme divisions giving details regarding the NGPRs selected and PR wise budget break up and activities to be undertaken by CTD, NACO and NCVBDC for the three year grant period of 2024 to 2027.
- It was informed by all three programme divisions that essence of the activities to be undertaken especially at the community level were largely unchanged from the proposal previously approved in 88<sup>th</sup> meeting of ICCM. There was no deviation from

priority areas identified through stakeholder consultations, consultations with Disease specific Technical Committees and community inputs. DDG TB indicated that while overall allocation to NGPR has reduced from previous proposal, the funds earmarked for community activities have been increased from 10 mUSD to 20 mUSD. Director NCVBDC also brought out that involvement of NGO, local organizations, networks etc will be ensured at national and state level implementation. Detailed presentations from each programme division may be seen enclosed at [Annexure -6, 7 and 8](#) respectively.

- Ms Anandi Yuvaraj, Vice Chairperson India CCM also extended a warm welcome to the Chairperson, while highlighting that the multistakeholder engagement, especially with communities and civil society in the India CCM towards proactive and participative decision making is commendable. The relaxation of experience criteria for selection of NGPR from 5 years to 3 years has been instrumental in increasing the participation of local and indigenous organizations. She also raised the issue of relaxation of financial eligibility criteria from 10 million USD to 5 million USD to encourage networks and community based organizations to also participate as NGPR. She noted that some of the activities and budgets have shifted to Government PRs, while cautioning that the challenges regarding utilization of funds by Government PRs be overcome for optimal resource utilization.
- In the interim, Chairperson delegated the chairpersonship for remaining part of the meeting to the Director General Health Services as he had another meeting at the level of Hon'ble Minister for HFW, which necessitated his stepping out.
- Dr R V Asokan, Member, CCM representing Indian Medical Association said that it was commendable that Indian organizations are shortlisted and selected for being NGPR. He queried if past performance of existing NGPR was taken into consideration while deciding to shortlist them, which was responded in affirmative by the DGHS.
- Mr Sudheshwar Singh, Member representing PLWD-TB constituency expressed his concerns regarding duplicity of activities by PRs, that was responded by representatives of CTD that in order to avoid duplicity, geographic areas have been divided amongst NGPR. Mr Shridhar Pandey, Member representing CSO-TB constituency informed on the chat box that his concerns were raised by other members and he did not seek the floor.
- Mx Simran Sheikh, Alternate member, KP-HIV constituency sought clarity on the reasons behind allocating more funds with Government as against non Government PRs. In response, it was informed that Government PRs would further engage Indian NGOs and other organizations to undertake activities. Programme divisions also informed that activities for supply chain, laboratory and technical support, that earlier featured with NGPR have been moved to the Government PRs, thereby enhancing their proportion.

- Mr. Vijay Nair, Alt Member CSO-HIV constituency opined that while shifting Supply chain management to Government PR and retaining One Stop Centre at NGPR, efforts should be made to streamline implementation of One Stop Centre through network and community engagement and not as direct implementation by NGPR.
- Mr Bhakta Bihari Mishra, Member CSO-Malaria constituency brought forth the pressing need to work with grass root level organizations in priority geographies for Malaria, which was informed as incorporated in proposal by Programme division.
- Dr Anju Soni, Alternate member Private Sector constituency raised concern of having adequate opportunities to coordinate with private sector in the HIV proposal and that coordination between new and existing NGPR should be strengthened. It was responded that both concerns are addressed in the proposal.
- Ms Celina Menezes, Alternate member PLWD-HIV constituency expressed her view that there should be representative from PLHIV community on screening committee. ICCM secretariat clarified that representatives from amongst civil society and community members and alternates across all three diseases were included in Screening Committee and Disease specific technical committees. She however reiterated her point in light of GIPA (Greater Involvement of People living with AIDS). The point was noted. She also raised the issue of not having a person who uses drugs representative on the ICCM. She sought a report on NACOs work with PLHIV children, Orphans who moved out of institutional care after 18 years of age, vulnerable children etc and programme division was requested to share the same.
- Ms V Hekali Zhimomi, Member Secretary ICCM and also ASDG NACO indicated that time is of essence and since the submission is due on 21<sup>st</sup> August 2023, and in light of most activities and budgets being identical to the previous version, we may look at finalizing and endorsing the proposal to ensure timely submission for due consideration of allocation of US\$ 500 plus 4 million to India.
- Vice chairperson said that there is pressing need for capacity building of SR and SSR selected further and that the selection of SR/SSR should be in accordance to community inputs and reported back to the ICCM. This was reiterated by Dr David Bridger, UNAIDS Member representing Bilateral constituency on chat box. If need be, ICCM members/ alternates could be involved in future meetings with NGPR.
- Chairperson reiterated that while record of discussions will be prepared and shared, members and alternates could start sharing their endorsements and programme divisions could begin preparing the documents for submission in accordance to the ICCM decisions.

**Decision/Action Points:**

- ICCM endorses the report of Screening Committee at **Annexure 5** and the recommendations therein with respect to NGPR shortlisting and additional recommendations.
- ICCM endorses the selection of NGPR for HIV, TB and Malaria as follows:
  - HIV- India HIV AIDS Alliance, SAATHII, HLPPT, Plan
  - TB- KHPT, HLPPT, TISS, SAATHII, Doctors for You
  - Malaria- TCIF
- ICCM endorses the priority areas and activities with budgetary allocation to government PRs and NGPRs as proposed by programme divisions within the overall breakup .

<b>Eligible disease component</b>	<b>Allocation in USD</b>	<b>Allocation utilization period</b>
Tuberculosis	280 million + 4 million	1 <sup>st</sup> April 2024 to 31 <sup>st</sup> March 2027
HIV	155 million	1 <sup>st</sup> April 2024 to 31 <sup>st</sup> March 2027
Malaria	65 million	1 <sup>st</sup> April 2024 to 31 <sup>st</sup> March 2027
Total:	500 mUSD + 4 mUSD	

- Based on the above, the funding request proposals to be developed and submitted by 21<sup>st</sup> August 2023.

**Agenda Item No. 3: Proposal for on boarding Oversight Committee for period of 1st January, 2024 to 31st December, 2026.**

- ICCM secretariat informed that the existing Oversight Committee completes its tenure on 31<sup>st</sup> December 2023, and hence the process for on boarding a new OC for a period of two years from 1<sup>st</sup> January 2024 to 31<sup>st</sup> December 2026 requires to be begun.
- The current OC has three vacancies, for which interest has been expressed from the following:

HIV	TB	Malaria
Celina Menezes, Alternate Member PLWD-HIV Vijay Nair, Alternate Member CSO-HIV	Shridhar Pandey, Member CSO-TB	Dr Ravi Kumar, Alternate Member, KP- Malaria Mr Bhakta Bihari Mishra, Member, CSO- Malaria Mr Samir Sahu, Member, PLWD- Malaria



- It was decided to include one person from each disease constituency in the existing OC upto 31<sup>st</sup> December 2023 under guidance from Vice Chairperson.
- The process proposed for on boarding OC with one third new members and no member beyond two terms as given below was endorsed and approved.
- Step-1– Calling for nominations from interested and eligible Current OC members, CCM and Non-CCM Members through an EoI. The detailed CV and the Skill Matrix format to be duly filled up and shared with India CCM Secretariat on its email id [iccmsect-mohfw@gov.in](mailto:iccmsect-mohfw@gov.in) by due date (within 3 week of EoI issuance)
- Step-2—Shortlisting of Eligible applications **over next two weeks**
- Step-3– Formation of a screening committee for finalization of OC committee members from the shortlisted applications **over next two weeks**
- Step-4– Formation of the Oversight Committee with due approvals after circulation of draft OC composition with full ICCM for timebound inputs and thereafter appraisal in next ICCM meeting

#### Decision Point:

ICCM secretariat to take needful action for constitution of Oversight Committee as guided by ICCM

Chair India CCM thanked the Vice Chair, Member Secretary and all the CCM Members for all their time and significant contributions to this meeting.

The meeting ended with a vote of thanks to the Chair.

#### Annexure-I

#### CCM Members

SI.No.	Name of Participants	Designation/Organisation	Physically Attended
1	Sh.Sudhansh Pant	Secretary (HFW)/Chair, ICCM	Y
2	Prof.Atul Goel	DGHS/Member, ICCM	Y
3	Ms.V.Hekali Zhimomi	AS&DG,MoHFW/Member Secy, ICCM	Y
4	Sh.Jaideep Mishra	AS&FA, MoHFW/Member, ICCM	Y
5	Ms.L.S.Changsan	AS&MD/Member, ICCM	Y
			<b>Virtually Attended</b>

1	Ms.Anandi Yuvaraj	Consultant with PWN+&NCPI+/Chair & Member CCM	Y
2	Prof.Ramila Bisht	Professor, JNU/Member ICCM/Member OC Committee,ICCM	Y
3	Ms.T.Mercy Annapoorni	Treasurer, Paneer Poo Paneer HIV Positive Women's Network Trust/Member, ICCM/Member OC Committee,ICCM	Y
4	Mr.Shridhar Pandey	Secy.&Chief Executive Officer, GBJS/Member, ICCM	Y
5	Mr..Bhakta Bihari Mishra	Secy, NIHAIDA/CCM Member	Y
6	Dr.Raghavan Gopa Kumar	Touched by TB/Member,ICCM/Member OC Committee,ICCM	Y
7	Mr.Pallav Patankar	Vice President, Piramal Foundation/CCM Member	Y
8	Sudeshwar Kumar Singh	Secy.TB Mukta Vahii/Member,ICCM/Member OC Committee,ICCM	Y
9	Sh.Samir Kumar Sahu	Executive Director, MBR/CCM Member	Y
10	Dr.Shubnum Singh	CII/CCM Member	Y
11	Dr.R.V.Asokan	Hon.Secy.Gen,IMA/Member,ICCM	Y
12	Mr.David Bridger	Country Director, UNAIDS/Member, ICCM	Y
13	Ms.Vandana Stapleton	Director,Health & Pop.Office,USAID,India/CCM Member	Y

### Alternate Members

Sl.No.	Name of Participants	Designation/Organisation	Virtually Attended
1	Sh.Rajiv Sridhar	Under Secretary (FB)/Alt.Member,ICCM	Y
2	Dr.S.D.Gupta	Distinguished Professor IIMR,Jaipur/Alt.Member, ICCM	Y
3	Mr.Vijay R.Nair	President,UDAAN Trust/Alt. Member CCM	Y
4	Dr.Matin Ahmad Khan	Trustee AMAN/Alt.Member CCM	Y
5	Mr.Amit Kumar	Secretary, AIDENT/Alt.Member,ICCM	Y

6	Ms.Simran Sheikh	Board Advisor, NNTP/Alt.memb ICCM	Y
7	Ms.Meera Lal Bahadur Yadav	TB Srvivor, SATB/Alt.Member, ICCM	Y
8	Dr.Ravi Kumar	Independent Consultant (VBD)/Alt.Member, ICCM	Y
9	Ms.Celina Menezes	National Rep.for Women Wing GAHR/Alt.Member,ICCM	Y
10	Diptendu Bhattacharya	Fellow, Survivors TB/Alt.Member, ICCM	Y
11	Ms.Poonam Kandari	Supervisor,Nirvana Foundations/Alt.Member,ICCM	Y
12	Dr.Anju Soni	Chairperson HIV/AIDS Committe FOGSI/Alt.Member, ICCM	Y
13	Mr.Luigi D Aquino	Chief of Health/Alt.Member, ICCM	Y
14	Ms.Melissa Nyendak	Director, CDC, Global Health/Alt.Member, ICCM	Y
15	Mr.Laurent Le Danois	Team Leader of Cooperation at the EU Delegation to India/Alt.Member, ICCM	Y

### Special Invitees

Sl.No.	Name of Participants	Designation/Organisation	Physically Attended
1	Dr.R.P.Joshi	DDG, CTD	Y
2	Dr.U.B.Das	DDG, NACO	Y
3	Dr.Tanu Jain	Director, NCVBDC	Y
4	Dr.Bhawani Singh	DD, NACO	Y
5	Dr.Vinod Choudhary	Medical Officer, NCVBDC	Y
			<b>Virtually Attended</b>
1	Dr.Raghuram Rao	ADG, CTD	Y
2	Mr.Gaurav Gupta	PWC	Y
3	Mr.Raman Sharma	LFA, PWC	Y
4	NPMU, NACO		Y

### India CCM Secretariat

Sl.No.	Name of Participants	Designation/Organisation	Physically Attended
1	Dr.Shobini Rajan	DDG/Focal Point, ICCM	Y
2	Ms.Gitanjali Mohanty	Coordinator, ICCM	Y
3	Ms.Veena Chauhan	Admn.Asstt., ICCM	Y

It may be noted that out of **26** Members of India CCM, **18** Members attended the meeting (either physically or virtually) and **08** Members did not attend the meeting (neither physically nor virtually) and out of **24** Alternate Members of India CCM, **15** Alternate Members attended. 20 out of 26 attended through member and/or alternate.

## **Agenda for 89<sup>th</sup> virtual meeting of the India Country Coordinating Mechanism**

**Date/Time: 14<sup>th</sup> August 2023, 9.30 AM**

**Venue: Room No. 155-A, MoHFW, Nirman Bhawan, New Delhi**

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### **Agenda item no. 1**

Endorsement of minutes of 88<sup>th</sup> CCM meeting.

### **Agenda item no. 2**

Update on recommendations by Screening Committee for shortlisting of Non-Government Principal Recipients and submission of India's Funding Request Proposal for Global Fund grant period 2024-27 and endorsement by India CCM for submission to the Global Fund by 21<sup>st</sup> August 2023.

### **Agenda item no. 3**

Proposal for on boarding Oversight Committee for period of 1<sup>st</sup> January, 2024 to 31<sup>st</sup> December, 2026.

### **Agenda item no. 4**

Any other item with permission of the Chair.