

Letter from the Global Fund re: the lessons learned from the TRP window 1

The Global Fund is committed to gathering lessons learned as the new funding model is carried out and then promptly communicating those lessons to countries.

Although the review process for the ten concept notes in the first window is not yet complete, following the TRP review in mid-June, the Global Fund identified key areas of concept note improvement that all applicants should keep in mind.

More detailed lessons learned and recommendations will be published in an upcoming Access to Funding report. To expedite the flow of information, we've created a list of five important lessons CCMs should consider when developing their concept notes.

This letter explains these initial lessons:

1. Prioritize.
2. Separate the allocation request from the above allocation request.
3. Refocus health systems strengthening efforts.
4. Demonstrate learning and evidence from previous experiences.
5. Concept notes should cover the period to the end of 2017.

Please keep in mind that these lessons emerged from a small sample and that the situation for any particular country will warrant a tailored approach.

1. Prioritize

Applicants must present a clear and prioritized concept note. Applicants need to show the strategic choices they made, given limited resources, to maximize the impact of Global Fund investments against the three diseases and to further health systems strengthening. The lack of an evidence-based prioritization in a concept note for the allocation amount was one of the major reasons the TRP would request to see another iteration of the concept note before moving to grant-making.

The TRP noted that several applicants in the first window had trouble shifting to the new funding model thinking of using "scarce" allocated resources to maximize impact. In the past rounds-based system, applicants had no funding limit to their requests. Under the new funding model with country allocations, applicants must provide a well-prioritized request within their allocation amounts. Even if applicants are eligible for incentive funding, they should write their funding request as if they will not receive any additional funds.

Prioritization needs to be based on evidence. The TRP will look for CCMs to justify their prioritization based on sub-national and sub-population epidemiological data and lessons learned from past implementation. Interventions to different regions or key populations should be costed, with the allocation going towards key populations or regions with highest prevalence, incidence or population at risk. Concept notes that moved directly to grant making without a request for another iteration were well-focused, strategic applications with funding directed toward geographic areas and key populations based on epidemiological evidence.

2. Separate the allocation request from the above allocation request

It is hard for the TRP to assess the technical merit if the concept note is not clear which interventions are proposed within the allocation amount and the above allocation.

CCMs must describe separately their allocation request and their above allocation request in sections 3.2 and 3.3 of their concept note narrative as well as in the modular template. Critical program components need to be included in the allocation request, if the allocation is large enough to cover them. Otherwise, the TRP may request their reprioritization into the allocation request. The TRP noticed critical elements included in some above allocation requests, which is inappropriate and risky because incentive funding is not guaranteed.

The above allocation request should be reserved for additional interventions beyond the minimum level, such as expanding geographic coverage or scaling up services. Funding for those activities might be possible through incentive funding, if the country is eligible, or through the register of unfunded quality demand. The above allocation request should rank choices with corresponding budgets and expected impact.

The TRP needs a costed ranking of activities in the above allocation so it can make incentive funding recommendations. The TRP uses the cost estimates to distribute incentive funding more strategically. Otherwise, the TRP may not be able to clearly identify where incentive funding can go when it is available.

3. Refocus health systems strengthening efforts

CCMs should make more effort to include relevant cross-cutting health systems strengthening (HSS) into their concept notes. CCMs should include cross-cutting HSS modules (for example, those that address two or more of the diseases) to help maximize the impact of Global Fund investments in the three diseases, and clearly describe in the concept note how this will be achieved. For example, in the past, some applications included disease specific HSS interventions, but did not analyze how this support could be expanded to

become cross cutting across the other diseases, which led to fragmented and inefficient HSS support.

As a general recommendation, the TRP suggests eligible countries set aside funding during the program split discussion for cross-cutting HSS, if the country has that need (this is particularly important for countries in bands 1-3; band 4 countries are assumed to have enough domestic funding to cover their HSS needs). This must be highly focused and maintain the principle of addressing at least two of the three diseases.

If health systems are weak in a country, there needs to be a clear explanation of how HSS will be incorporated to support the implementation of the disease programs. Otherwise, the TRP may question whether investments in treatments and prevention will have an impact. When scaling up a disease response, HSS needs may need to be adjusted as well.

If concept notes don't include requests for HSS from the Global Fund, then applicants need to explain how HSS is otherwise being addressed. If HSS is already funded, include this information in section 2.1.a. If there are gaps – for example, in procurement and supply chain management or in health information systems – describe how, if at all, these constraints will be addressed and by whom in section 2.1.c.

If CCMs are making funding requests to address the HSS constraints described in section 1.1d, and to fill the funding gaps described in 2.1.c., include information about the HSS request and what it aims to achieve in section 3.2.

HSS is largely country specific so tailored analysis is needed for each country. Technical partners should engage with CCMs to bring stakeholders together to talk about health systems challenges, constraints, gaps and each stakeholder's role. They can answer, in the country context: What are the key investments that can help in the country? CCMs need to ensure all key players for HSS are included in country dialogue and provide clear evidence on how this involvement has been used in arriving at the program split. Then, countries can better demonstrate how HSS is being incorporated and addressed.

4. Demonstrate learning and evidence from previous experiences

The Global Fund has been supporting countries for more than a decade. In the concept notes, the TRP would like to see applicants explain what disease programs have previously been invested in, what the impact of those programs was, and – most importantly – how lessons learned from those programs were used to reshape future investments. When CCMs included this in their concept notes, it was considered very compelling.

CCMs should analyze the results of past programs and recognize how the proposed interventions build on them, maximizing impact. Concept notes should not signal “business as usual,” simply repeating and extending past programs without good reason. Based on evidence, programs should be adjusted to focus more strongly on the most effective approaches used in the past. This information can be provided in section 1.1 of the concept note narrative.

5. Concept notes should cover the period to the end of 2017

Only in exceptional cases may countries request a shortened grant duration which ends before the end of 2017. However, even if shorter grants are requested and approved by the Secretariat, concept notes should still cover the period to the end of 2017. In addition, these concept notes should explain where funding will come from to cover the period until the end of 2017, if not from the Global Fund, or the country should ensure the above allocation request covers the remaining period. The TRP may request another iteration of a concept note if it has unanswered concerns that a shorter timeframe puts the continuity of programs at risk in the event that the funding does not materialize or falls short.

If you feel your country has a good justification for a grant end date before the end of 2017, please talk to your Fund Portfolio Manager. This request, along with rationale, needs to be submitted as soon as possible and made a minimum of one month before concept note submission.
