

The Global Fund COVID-19 Update to the Board

44TH BOARD MEETING, 11-12 NOVEMBER 2020 | GENEVA, SWITZERLAND

Context

- This document is an annex to the **COVID-19 Response and Business Continuity** informal paper, presented to the Board at the 44th Board Meeting (11-12 November 2020). The slides contained provide further context and background support to the paper.

Agenda

Recap of the COVID-19 context

The Global Fund's response

Looking ahead

Agenda

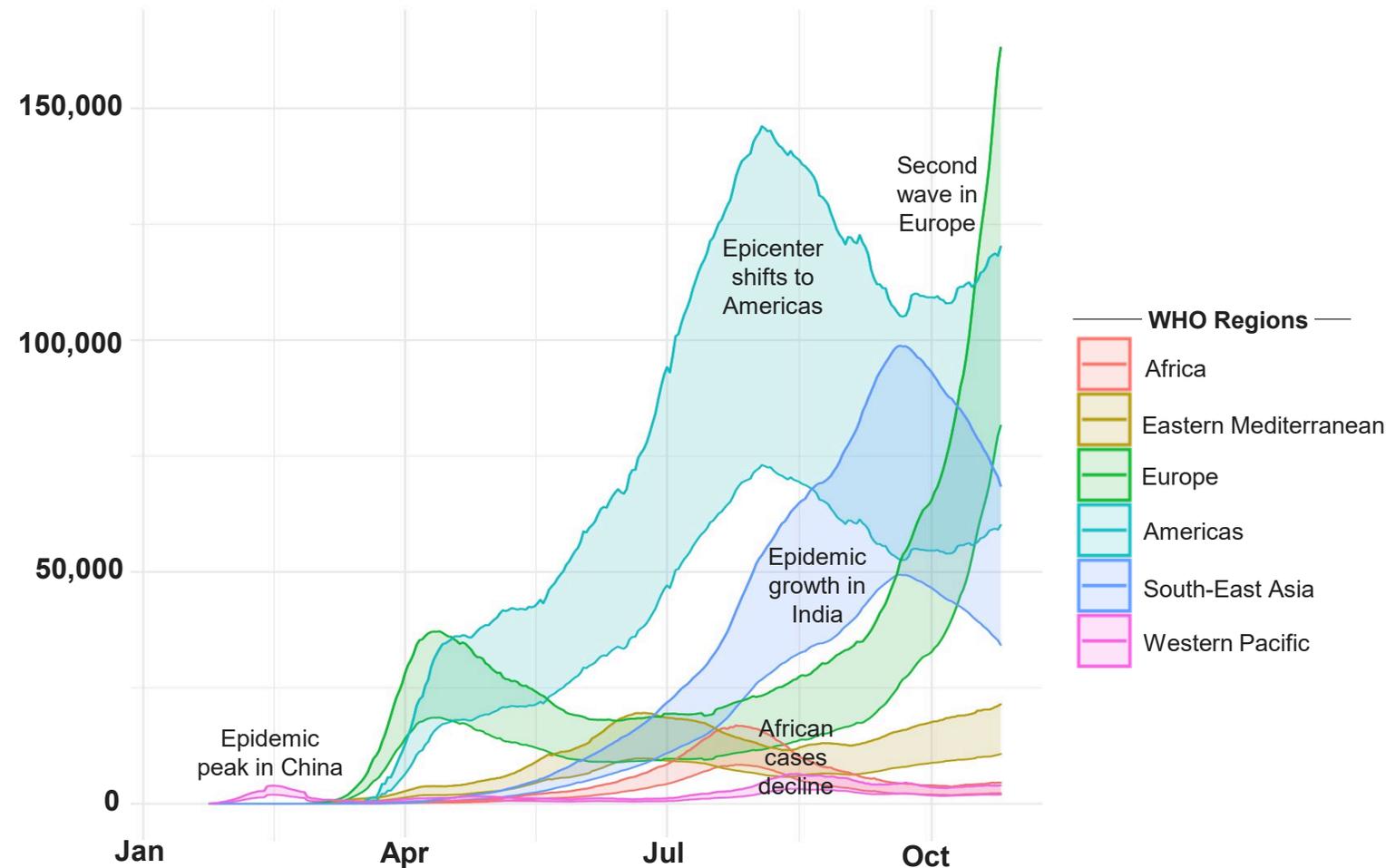
Recap of the COVID-19 context

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The COVID-19 pandemic continues to escalate rapidly, as seen through global and regional epidemiological trends

Daily confirmed COVID-19 cases by region (14 day rolling average)



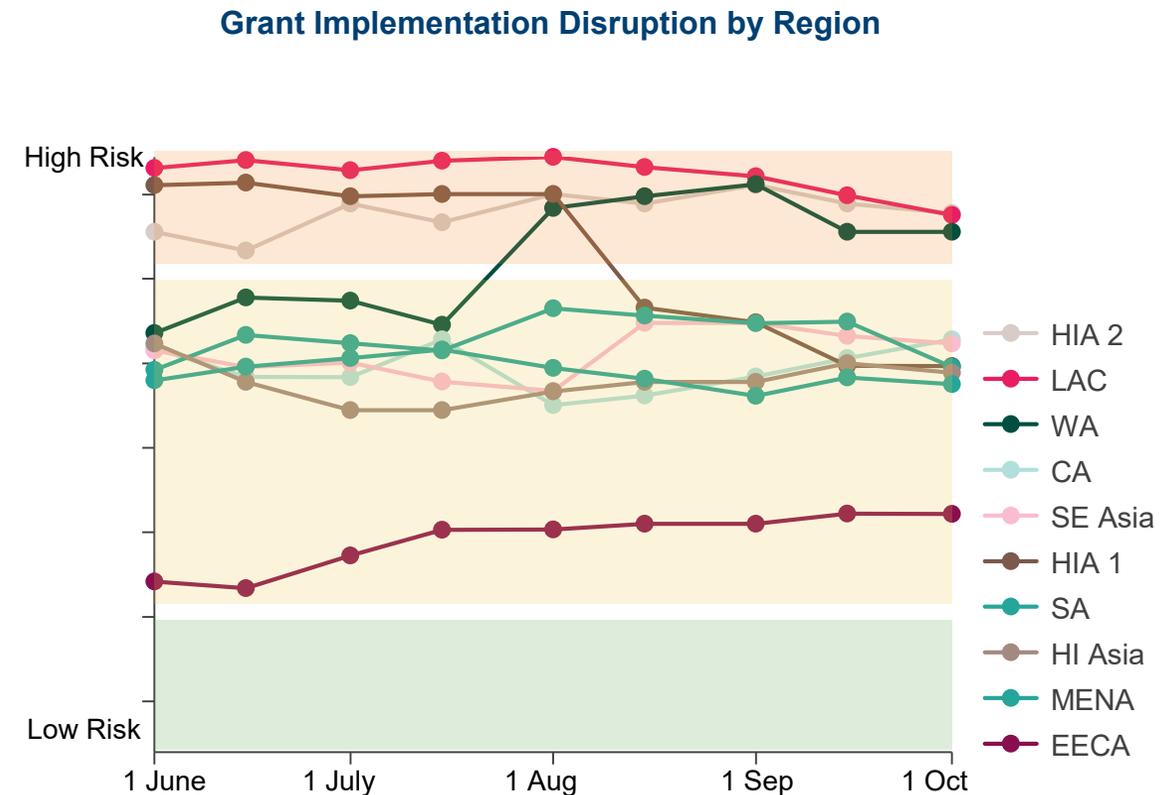
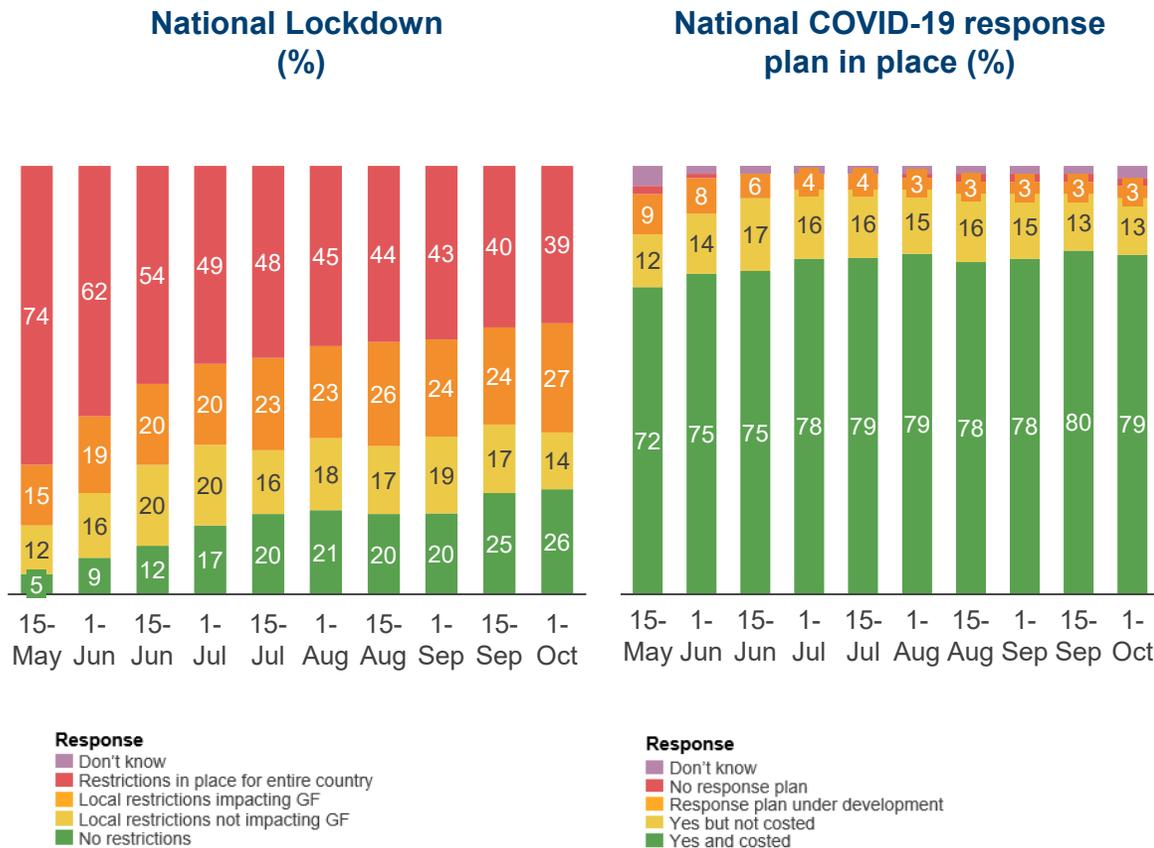
Key points

- Over 42 million confirmed cases and over 1.1 million confirmed deaths globally as of October 2020
- The Americas remain heavily affected by the pandemic, accounting for 36% of daily cases and 48% of daily deaths. The majority of countries in Latin America are experiencing sustained community transmission.
- The pandemic continues to expand in Africa, although the rate of growth has recently slowed - daily change in the WHO African Region is currently 0.4%, down from over 3% at the end of July.
- Daily cases are increasing exponentially in much of Europe, with a lagged increase in deaths.
- Although cases in India appear to be declining after a first peak; with over 7.9 million recorded cases, it is the most affected country in Asia.
- The ten most affected countries with current GF grants are India, Colombia, Peru, South Africa, Iran, Iraq, Bangladesh, Indonesia, Philippines and Ukraine.

Since May, fewer countries are in lock-down, but there is a high risk of implementation disruption reported in several regions

Around the world, **both national lockdown and national Covid-19 response have improved** since May. Less than half of countries (39%) remain in national lockdown and 79% of countries have costed response plans.

High Impact Africa 2, Latin America, and Western Africa report the highest disruption in Grant Implementation among all Global Fund regions in the latest survey results (1 Oct 2020).



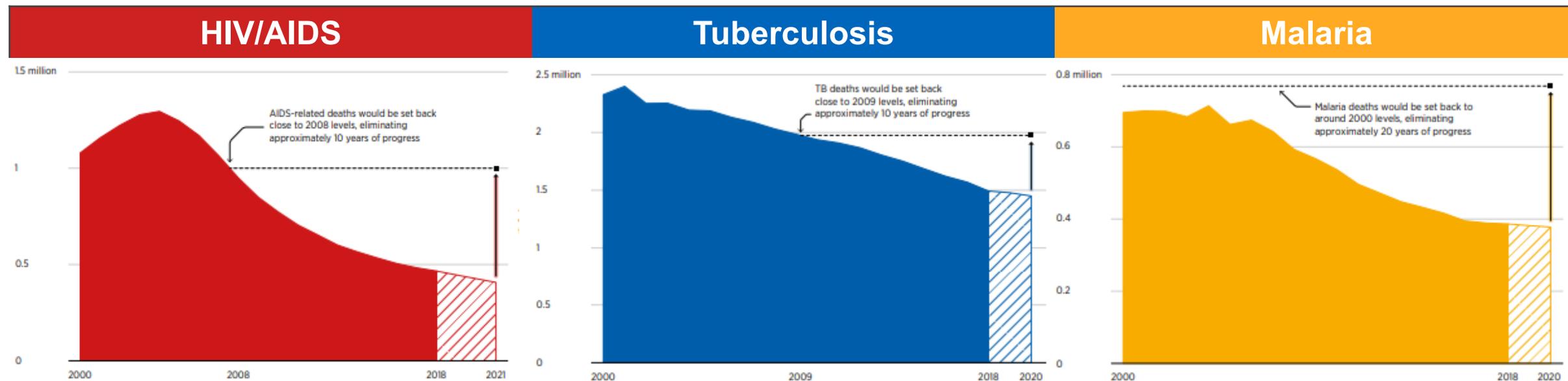
We are seeing levels of disruption in service delivery, national stocks, and supply chain

Level of disruption to service, products and in-country systems

Implementation Challenges



Modelling predicts HIV, TB and malaria deaths could as much as double in the next year due to COVID-19, derailing years of progress



534K Additional **AIDS-related deaths** in 12 months over 2020-21 vs 2018 as a result of COVID-19 (in Sub-Saharan Africa), due to:

- Access to treatment disrupted, thus increased mortality / reduced PMTCT
- HIV testing reduced, thus possible increased incidence
- Community-based service delivery scaled back, having a direct impact on KPs

525K Additional **TB deaths** in 2020 vs 2018 as a result of COVID-19 (globally), due to:

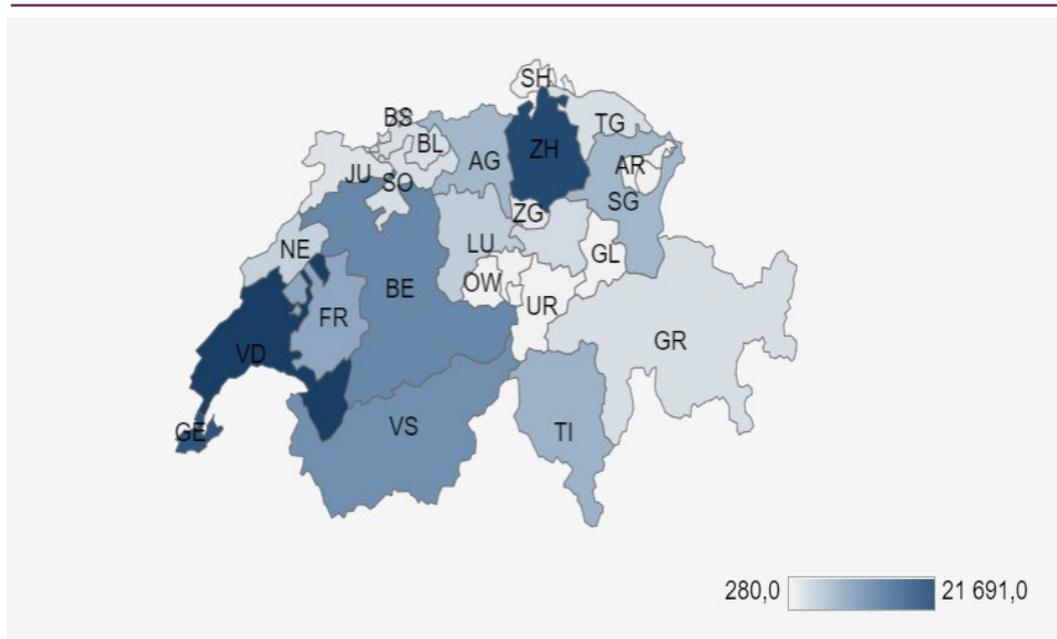
- Lab services disrupted, hence lower case notifications/increase missing cases
- TB patients at higher-risk, therefore higher TB/COVID-19 mortality
- Similarity between COVID-19 and TB, hence stigma in providing care

382K Additional **malaria deaths** in 2020 vs 2018 as a result of COVID-19 (in Sub-Saharan Africa), due to:

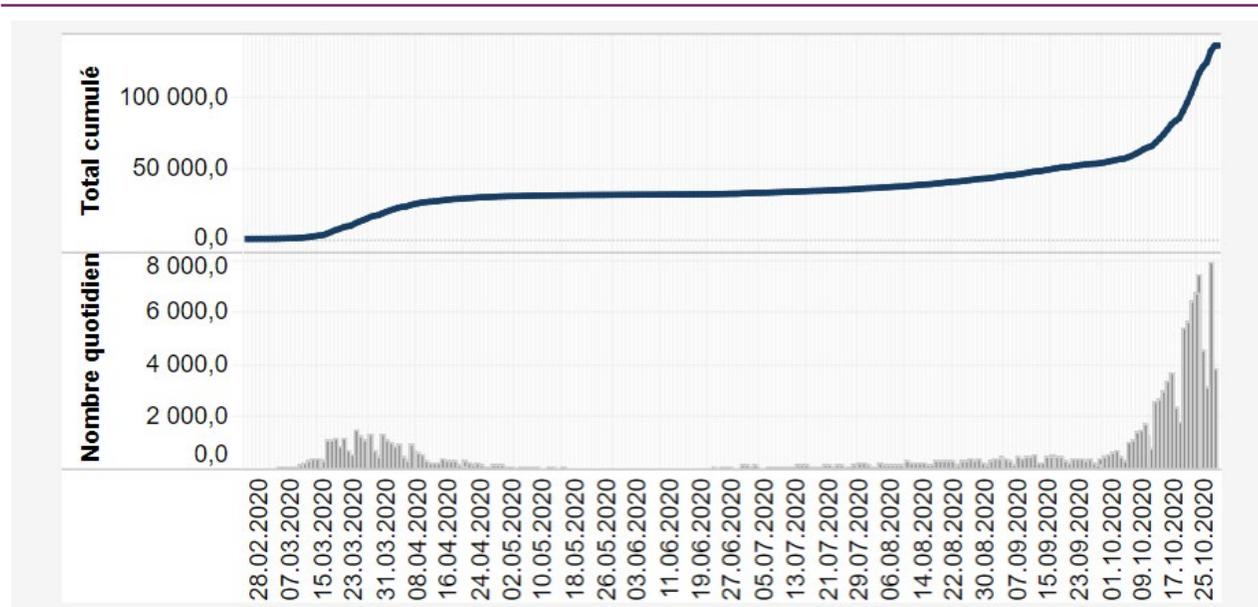
- Bednet distribution delayed, thus increase in infections
- Drug stock-outs leading to reduced anti-malarial availability
- Similarity in initial symptoms, hence stigma in seeking and providing care

The COVID-19 pandemic continues to also affect the Secretariat with the volatile crisis situation in Geneva (1/2)

Lab-confirmed cases by geographic distribution, National Swiss data as at October 28, 2020



Lab-confirmed cases by chronology, National Swiss data as at October 28, 2020



- The crisis situation in Switzerland remains very volatile with a huge spike over the past 2 weeks and reaching a peak of ~9000 positive cases/day, creating a risk for the organization and staff:
 - The Geneva Canton is now in a **lockdown, effective 2 November**, for at least 4 weeks.
 - Swiss government and Geneva Cantonal measures are **changing regularly**.
 - Switzerland is also on the **high-risk travel list** of many countries.

The COVID-19 pandemic continues to also affect the Secretariat with the volatile crisis situation in Geneva (2/2)

...affecting Secretariat regular operations in various ways

Limited in-person capacity

- From 19 October, for **safe physical distancing** following government guidelines, staff was asked to work from home (recommended) with cases rising. From 3 November, **the GHC is closed** with Geneva in lockdown
- Over the course of October, **20 staff members** have tested positive for COVID-19 – far more than in the first phase of the pandemic up to October

Travel & border restrictions

- The **internal travel ban** affects the way we operate with countries, donors & partners
- **Travel & quarantine restrictions** also created **disruption in recruitment** together with increased surge recruitment and **relocation** challenges
- In addition, due to **extended period of working remotely** and in some cases outside the Geneva area, there was a need to investigate **regulatory (legal/tax) implications**

Workload demands

- COVID-19 has created an **increase in workload demands and stress**, as teams engage in our crisis response and take on additional activities, on top of an **already busy year in the grant cycle & strategy development**
- This has led to some **delays in long-term HR activities planned to decrease these risks**, mostly due to **reduced capacity** of Secretariat counterparts

Family & health constraints

- This crisis has also added tensions of **increased home demands**, along with **family and health constraints, reducing Secretariat capacity** (e.g. balancing WfH with no available childcare)
- Some staff **family members/friends** are also being **impacted negatively by COVID-19** in their home countries

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The Global Fund's response

(a) Keeping our people safe

(b) Protecting our core mission

(c) Helping countries we invest in respond to COVID-19

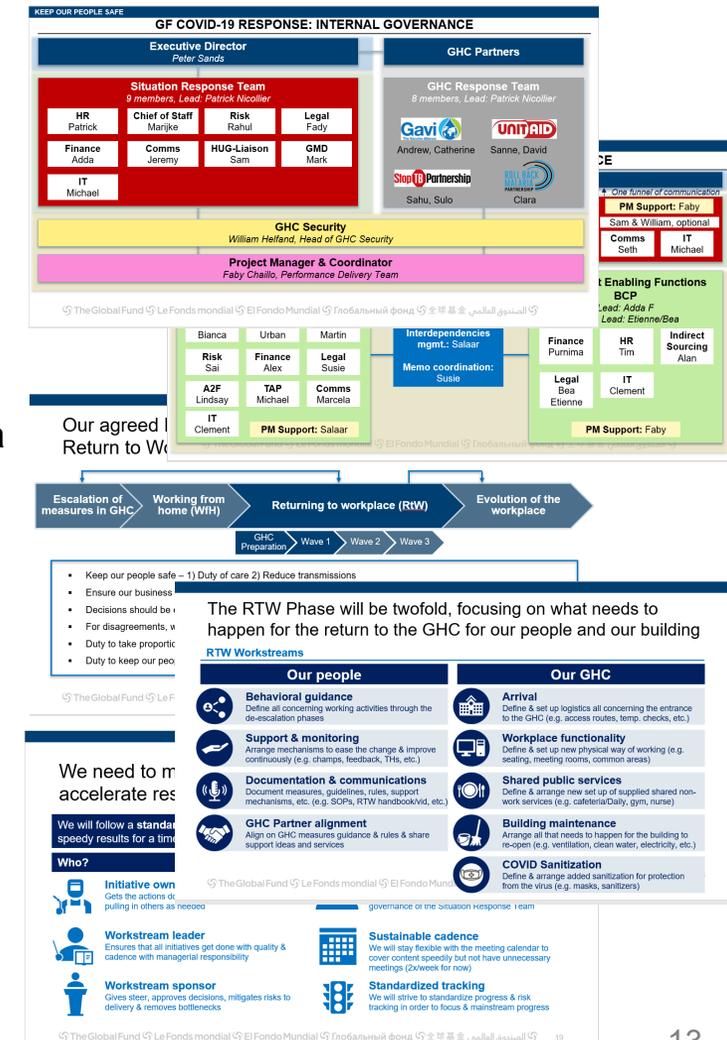
(d) Our role in the global COVID-19 response

Looking ahead

Internally, the Situation Response Team continues to focus on duty of care for our staff's safety and ensuring business continuity

Context for the Situation Response Team & the Keep Our People Safe stream

- In response to the COVID-19 disruptions to our workforce, the Secretariat established early on a dedicated **Situation Response Team** under the **Head of Human Resources'** lead
- With a **cross-functional governance structure** in place for the Global Fund and the GHC Partners, this group continues to meet regularly for **decision-making, oversight and monitoring** of the situation and response measures, with weekly updates to the MEC and Board
- Regular **Board updates** have been well attended with an **ED progress report** and a **Q&A**, to complement update emails and **COVID-19 reports and sessions** with **Committees** in March & July
- The SRT follows **established and GHC-aligned principles** of evidence-based decision-making for a proportional response to ensure **duty of care to keep our people safe** and **business continuity to deliver on our mission** – all in consideration of 4 defined sources of information, including national authorities, the Geneva hospital and the WHO
- Even with materialized **disruptions in our HR capacity**, we continue to rise to the occasion to mitigate risks, focus prioritization, and redeploy resources to **successfully continue operations**
- The response has followed **and adaptative and phased approach**, with: 1) an escalation period in the GHC since end of February, 2) a decision to move to 100% teleworking on March 16, 3) a de-escalation period to return to the workplace in phases starting with up to 20% on June 8, followed by 45% on July 6 and 4) a return to teleworking effective 19 October, with full closure of the GHC on 3 November after a lockdown in Geneva and a spike in cases and hospitalizations across Switzerland



We continue to successfully support our workforce and business operations in light of the disruptions...

The Secretariat has ensured continuous engagement and support to all staff and the business through various levers, including:



Dedicated COVID-19 inbox

Managed by Situation Response Team for 100% timely responses to staff questions

Implementation of BCPs for all business processes in Performance & Accountability framework – outlining risk disruption scenarios & mitigation plans, prioritization, interdependencies management, and more under oversight & review by cross-functional screening team, SRT and MEC

52 Business Contingency Plans



Triggers & Measures

Defined & monitored prior to each step of the crisis in alignment with GHC Partners

Continued adaptation to minimize risk impact on the organization (e.g. virtual onboardings, on-time remote pay-roll, investment mgmt. like health insurance, Global Fund provident fund, and more)



HR Processes



Pulse surveys

In September, a staff survey analyzed staff feedback on GF leadership culture during COVID-19.

- Engagement scores at 95% - an all-time high.
- Leadership scores at 79%
- Communication scores at 90%
- Wellbeing scores at 45% - an all-time low.



Increased communication

Added mechanisms include:

- Six successful virtual Town Halls with record-high participation of ~650-760 staff
- At least bi-weekly all-staff emails from Head of HR
- Panel discussions for mental health support
- HR and Staff Counsellor psychological support
- Support guides for managers on work-life balance, teleworking, emotional resources, and more
- HR team trained on supporting domestic violence & building resilience

Pushed the SwissCovid App to GF phones, recommending its use in order to minimize risk of transmission through contact tracing



Contact tracing App

... and monitor the situation to mitigate continued risks related to our people

Continued risks

- **Workload & capacity:** the Workload Analysis showed an 11% decrease in staff capacity, with peaks of 25-40% in certain areas of the organization at the peak of the crisis – all combined with increased workload due to grant making & strategy development year and additional activities introduced in response to the COVID-19 pandemic
- **Staff productivity & risk of burnout:** there is an increased risk of staff burnout and productivity loss due to COVID-19 impact on employees or their family members, and a partially virtual environment. In early July, staff annual leave balance were on average 40-50% higher than previous years, and we had >\$1MM in accrued leave. There is a risk of employees not taking time to rest, shifting to home working without daily face-to-face interactions with colleagues and blurring balance between home and work
- **Keeping our people safe in the GHC:** There is an increased risk of staff falling sick as well as possibility of partial lockdown that could lead to important productivity loss.
- **Crisis management:** The sustainability of the crisis management continues to be demanding given the lasting and rapidly changing nature of the crisis & government/travel measures



Mitigation actions

- To mitigate these risks, the SRT & security team continue to **monitor the situation daily** with recurring meetings 2x/week
- HR & MEC continues to **support managers and staff** through aforementioned resources/actions to mitigate workload, capacity & people risks – ensuring that department **capacity needs are addressed while balancing burnout risks**
- **Many activities shifted online for business continuity**, such as virtual hiring and onboarding, learning and development workshops, and country, donor and partner interactions
- A successful **annual leave campaign** was put in place to encourage staff to take leave & rest for sustainability of their work. End of August data showed a significant improvement in terms of staff taking leave, while still remaining flexible to address emergency requests.
- We continue to **reinforce GHC safety measures** in place, and all COVID-19 cases have followed self-isolation & contact tracing **procedures**, preventing any GHC transmission
- Most **risk mitigation activities** are **embedded in business-as-usual processes**, and we continue to compensate efforts impacted by the crisis through **streamlined crisis response measures**

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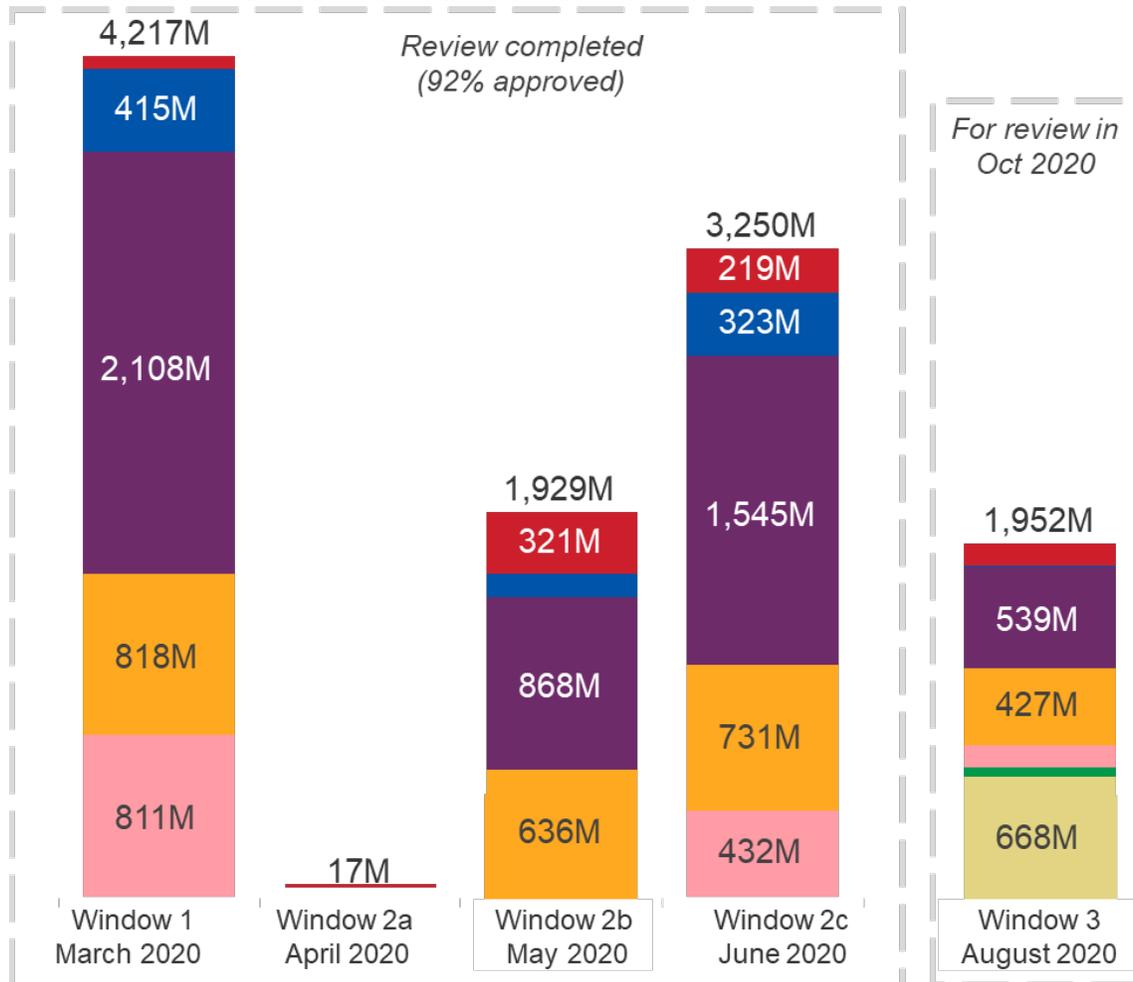
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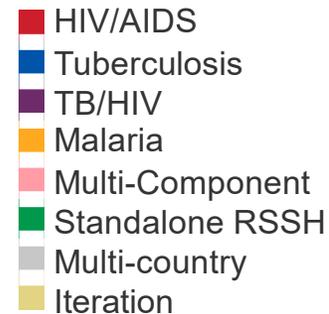
Looking ahead

Despite COVID-19 disruptions, grant-making and funding request development is continuing as per normal (1/2)

US\$ allocation under review, by TRP window, as of 23 October, 2020

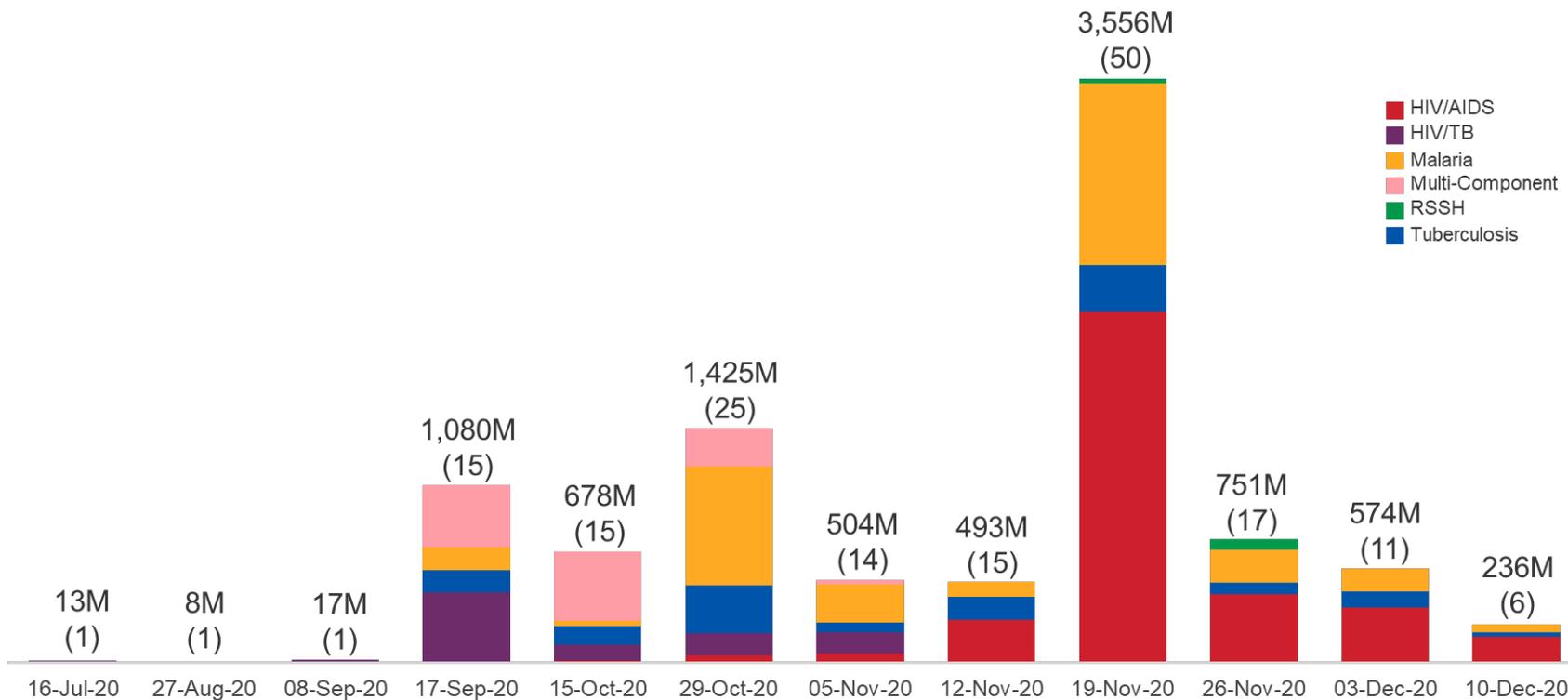


- In Windows 1 and 2, 110 out of 120 funding requests (**92%**) were **recommended for grant-making**, representing **\$9.4 billion in allocation funds**. **\$1.9 billion** was under review in **October (and November as needed)**
- **\$255 million** in catalytic **matching funds** and **\$124 million** in catalytic **multi-country funds** were also recommended for grant-making
- Approximately **58 funding requests**, with a value of \$1.3 billion, **are still in development** and will be **reviewed in 2021**



Despite COVID-19 disruptions, grant-making and funding request development is continuing as per normal (2/2)

Grants under review at Grant Approvals Committee, as of 23 October, 2020



Note: all values in USD million. Bracketed figures represent number of grants registered for GAC.



Source: GOS; Allocation amount is current program split (if agreed) or communicated allocation.

- **171 grants representing \$9.3 billion** are currently registered for GAC recommendation, and Board approval, **in the second half of 2020**
- With COVID-19 impacting in-country capacity there is a **risk that not all grants will be signed on time**, potentially resulting in a higher volume of bridge letters or extensions than in the previous cycle
- The **Secretariat** is focusing **all available resources** on supporting **grant-making, grant review and grant signing** in these final few months of 2020

We are on track for the adapted Strategy development process despite the COVID-19 disruptions

Since the Strategy development process was adapted to the context of COVID-19 in March 2020, the process has successfully been adjusted to the new environment and continues to be driven forward, with:

Adapted SC and Board process

- Adapted SC and Board consultation process, with series of SC cluster calls and Board retreats taking place over Q4 2020
- Extensive background documents to support Constituency preparation, distilling evidence, input and context

Open Consultation & Website Launched

- Almost 250 responses from individuals and stakeholder groups; input continuing through 2020
- Responses span all regions, across stakeholder groups, responses in 5 languages
- Wealth of landscaping analyses and background materials produced, with partner input
- Website visited > 3,200 times, 84% returning visitors, 109 countries reached
- > 700 downloads of open consultation, landscaping and other background documents

Constituency and Partnership Consultations

- Assistance provided to 24 Constituencies, Implementer & Donor Groups for their consultations
- >20 stakeholder groups in GF partnership assisted with consultations (e.g. GFAN, W4GF, Friends, ACB, Youth Council, JWG)
- CRG topic consultations to be hosted in Q4; many more continuing externally across GF partnership

Partner Strategy Development

- Continued engagement across partner organizations and GAP to align, coordinate and ensure respective strategy development processes work together for strengthened impact

Thoughtful deployment of business contingency plans & flexibilities supported continuity of programs, Secretariat processes, and staff wellbeing...

Business contingency plans (BCPs)

BCPs were developed by each division/department, focused on:

- **Internal Secretariat operations**
- **Grant facing processes**

They established a graded response based on:

- **Extent of disruptions**, especially due to potential reduction in Secretariat capacity
- **In-country disruptions** and travel restrictions

BCPs supported:

- ✓ **Program continuity (current implementation & design and approval of new grants)**
- ✓ **Greater prioritization for impact**
- ✓ **Continuity of key Secretariat processes**
- ✓ **Wellbeing and safety of Global Fund staff**



Flexibilities



Countries / implementers

- Extended timelines for grant reporting
- Provided additional rolling funding request submission windows and TRP reviews
- Supported CCMs to conduct remote reviews (8-10 CCMs benefited from these flexibilities)



Health products

- Streamlined QA on pre-shipment testing
- Extended delivery deadline for health products
- Advance Ordering Mechanism for C19 health products



IT Systems

- Robust arrangement for delegated approvals
- Enhancements to facilitate remote working & systems adaptation to accommodate business flexibilities
- Rolling out IT Business Contingency Management System and heightened IT security



Resourcing of new workstreams

- Enabled timely and effective C19RM staffing

...including through a robust IT response to COVID-19 disruptions

Operationalize teleworking capabilities

- **MS Teams** roll out to 700+ users with training, tips & digital workplace guidance
- **Enablement of remote working**: including IT equipment and assistance for a monthly average of 15,000+ virtual meetings across four different platforms.
- Continued **success of virtual sessions** including the Board, Audit and Finance Committee, Strategy Committee, GAC, TRP sessions and all staff Town Halls.
- Door-to-door **delivery** of new and/or replaced **equipment** for staff during the teleworking period & remote to on-site online printing capability
- Provision of **mobile devices** to Global Fund consultants
- Our **Digital Workplace team** are in the process of launching 'Get the most out of meetings' guidance, support and video to enhance the virtual working experience.

Ensure critical business function continuity & flexibility

- IT **BCP** in place, aligned to organizational requirements & being implemented
- Identified '**32**' **COVID-19 related needs** from seven departments including cross cutting needs. 47% of these activities completed as at 23 October 2020
- Assessed and commenced **33 BCP related initiatives** across IT functions and one additional cross cutting response. 70% of these activities completed as at 23 October 2020
- Focus on secure remote connectivity to **key digital platforms** such as Office 365, Oracle, Kyriba, Salesforce, ServiceNow, Tableau, Coupa, BlueJeans, and the external website.
- Validation that **third party vendors continuity** and disaster recovery plans meet our requirements.

Support to country teams and civil societies

IT support to PRs, SRs, CCMs and Civil Society

As of 23rd October 2020:

810 licenses deployed across 58 countries

MS Teams licenses rolled out to 54 countries totaling 698 licenses

Blue Jeans licenses rolled out to 25 countries totaling 112 licenses

4G routers & data cards also dispatched



Geographical coverage of tool roll out

Information Technology security improvements

The focus has been on enhancing the **security** and **flexibility** of key platforms, alongside specific COVID-19 interventions for finance and on GOS and Wambo.

- Activate **Multi Factor Authentication (MFA)** for all Global Fund users
- Work initiated on an **email encryption project** with a secure email gateway to protect against phishing, email fraud and other threats to users.
- We have enhanced our **cybersecurity incident** response, including an on-call cyber forensic team provided by a key vendor.
- Vendor security resources have been onboarded to support key activities including **security patching and remediation** – to manage increased vulnerabilities during COVID-19 identified
- Roll out of **security training** course to all staff (E.g. Email compromise training)

Since we remain in a crisis situation, Business Contingency Planning (BCP) flexibilities also remain essential

Current situation:

- **COVID-19 situation continues to remain fragile in the countries we support** and Europe is also witnessing a **second large wave** with increased infections - **return to pre-COVID-19 state is even more protracted at this stage**
- Countries continue to have **travel restrictions** and been in and out of **national or local lock-downs**, which **limits** the GF, technical partners and GF's assurance providers to provide **adequate support or oversight**
- **Workload peak for Funding Request/Grant Making in Q4 2020/Q1 2021**
- **Supply side disruptions** for ATM health products likely to be protracted and worsen if COVID-19 disruptions continue
- **Unmet demand for COVID-19 supplies** (diagnostics, PPEs and therapeutics)
- **Data gaps** to measure extent of impact of COVID-19 on essential health services including ATM to initiate adequate mitigating actions

Path forward:

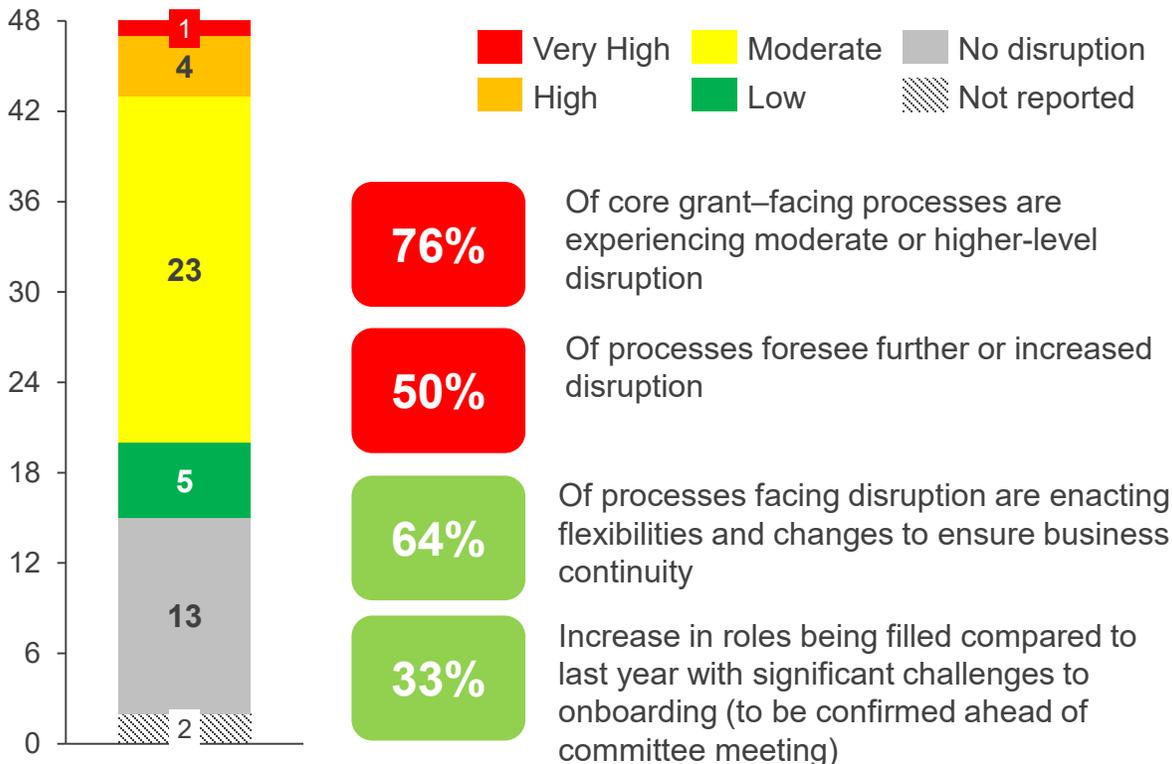
- Thanks to Board and Executive Director approval, the Secretariat will **continue its operations under the Business Contingency plans at least until 31 March 2021**, and **retain the flexibilities approved under the BCP** including some of the Board approved provisions (C19RM, limited exceptions to QA policy)
 - Prioritization of key deliverables/processes
 - Manage and secure IT systems
 - Implementing SO initiatives to ensure commodity security
 - Delegation of authority process ensuring resilience
- The approved governance mechanism through **Situation Response Team** will continue to ensure **agility and ensure decisions are taken at the appropriate level** to adequately manage ensuing risks
- The Secretariat will continue to focus on **wellbeing and safety** of Global Fund staff and the implementers of Global Fund-supported programs (PRs/SRs/front-line workers)

We continue to monitor disruption on Secretariat Performance & Accountability processes to actively mitigate risks

While we saw disruptions in Secretariat operations due to COVID-19...

...we continue to actively mitigate disruptions through various mechanisms

Results from internal P&A Analysis on COVID-19 disruption to Secretariat processes, Q2 Survey*



- The **Performance & Accountability** team continues to **assess progress on all major GF business processes** each quarter, reporting on pre-defined metrics
- The **Business Contingency Planning** monitoring of **risk levels, disruption scenarios and flexibilities** used has been streamlined and tied to the P&A reporting process, with some defined limited processes monitored more regularly on a monthly basis
- The **Situation Response Team, Core Operations and Secretariat Enabling Functions** continue to **act on any identified risks** or bottlenecks, to ensure we can continue to **deliver on our core mission**

Disruption status

* All figures (except recruitment figures) are an extract of the Q2 Performance & Accountability progress report. Q3 results reporting currently being consolidated; preliminary results showing lower disruption than Q3

Core business risks: There still are four key risks we currently face

BCP Objective

Implement Current Grants to Max. Capacity

Make & Sign high quality grants

Minimize long term impact on ATM

Wellbeing & Safety of Staff

1 Monitoring the true extent of disruptions:

Data gaps on the extent of disruptions have significantly limited ability of various stakeholders to measure the adequacy of mitigating actions: *LFA COVID-19 Monitoring Survey; Key Results/Indicator Monitoring; Partner Collaboration*

2 Ensuring quality of funding requests and grant-making:

Competing priorities between current grant implementation, funding requests / grant-making and managing grant revisions (C19RM) present challenge of delays in execution and rigor to established standards: *Strong GF Partnership and TRP engagement; BCP Flexibilities for funding requests and grant-making*

3 Securing IT and Communication:

Very high dependency on IT and communication systems and tools to ensure business continuity due to remote working, and heightened IT security risk due to phishing attacks: *Extended IT support to Secretariat/CCM-PR/governing structures to facilitate remote working and continued collaboration; IT Business Contingency Management Systems; enhanced diligence on key financial operations; enhanced IT security*

4 Delivering sufficient supply of ATM health products:

Supply side constraints and delays in delivery across all product categories, data gaps to triangulate reports of risks of stock-outs and disruptions in government/partner supported procurements: *Proactive management for early order placement for ATM to mitigate disruptions - currently well mitigated; strengthening coordination with partners to improve demand forecast*

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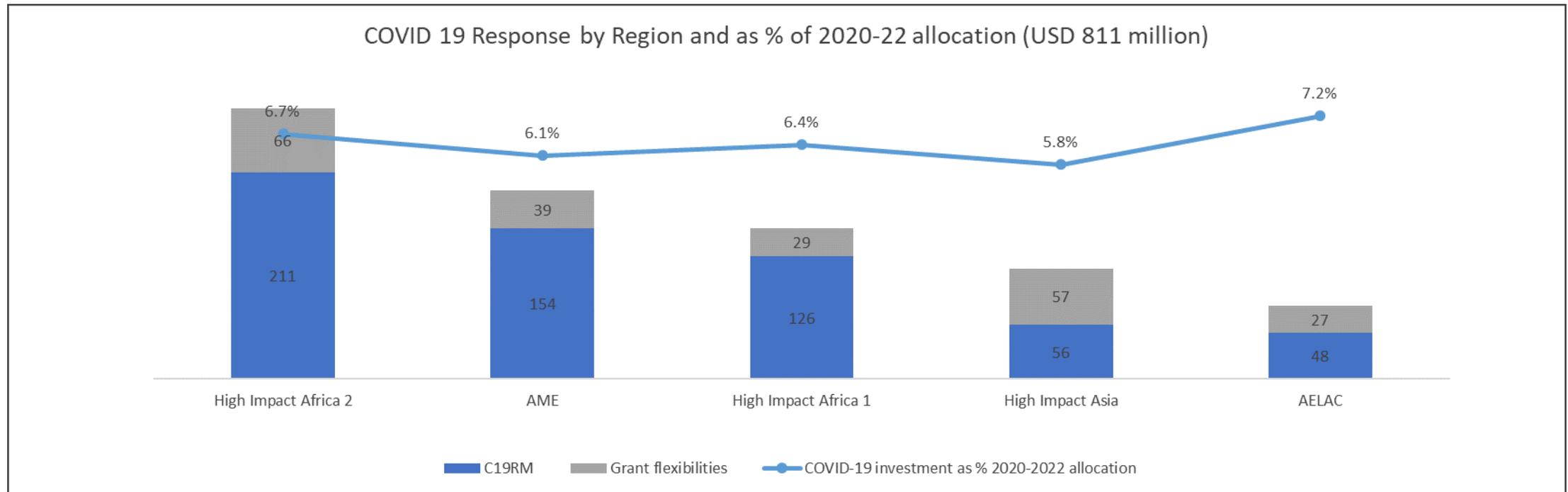
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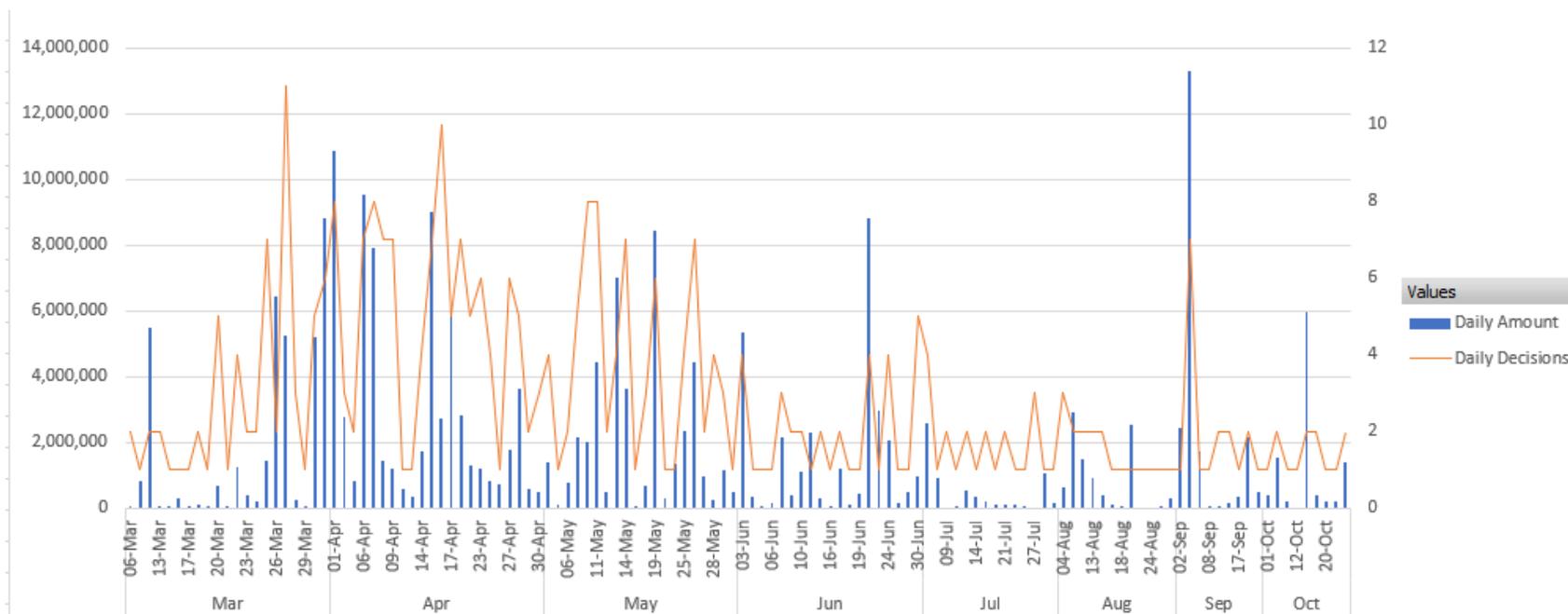
Since the start of the COVID-19 crisis, the Global Fund has deployed over \$800 million to support countries in their response

- The Global Fund has deployed **\$811 million** (up to 23 October 2020) to support countries' COVID-19 responses
- This includes **\$217 million in grant flexibilities** and **\$594 million** through the **COVID-19 Response Mechanism (C19RM)**
- Funding has been deployed across **107 countries** and **13 multi-country regions**



Our grant flexibilities have provided rapid support to countries since March to mobilize resources to fight COVID-19 (1/2)

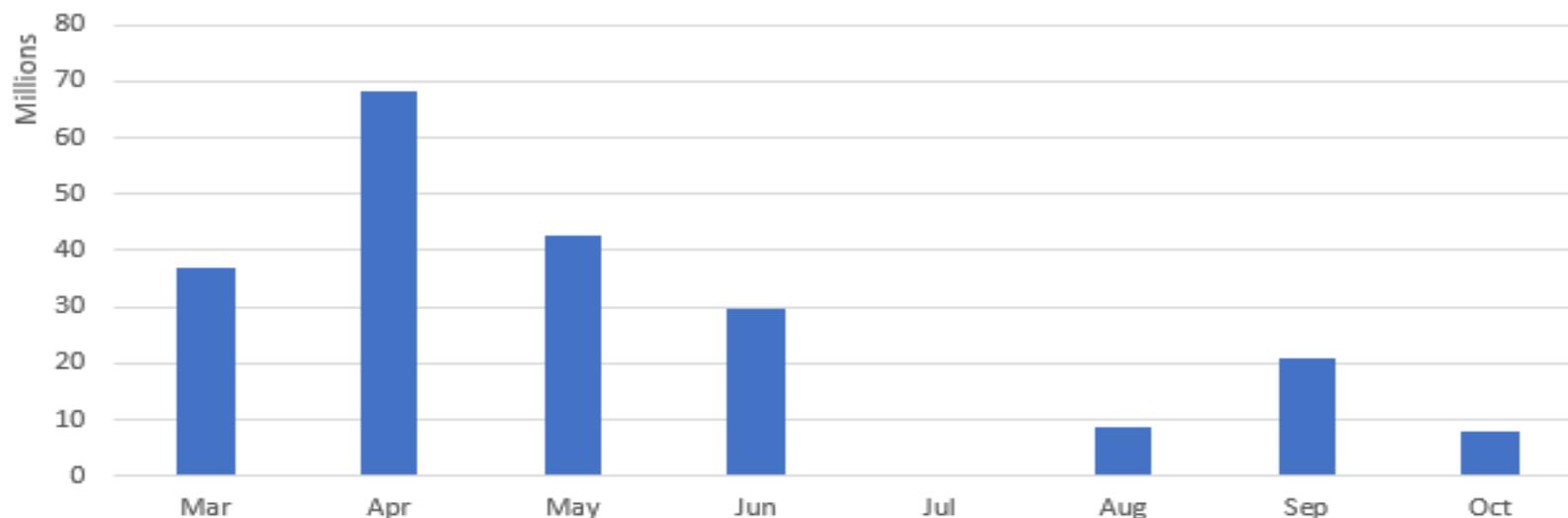
Grant flexibility amounts approved and # of decisions made per day, Y axis on left: Amounts, Y axis on right: # of decisions



- The Secretariat made grant flexibilities operational in **early March** (<100k infections were registered globally), allowing countries to take advantage of **rapid Global Fund decision-making**
- Uptake by countries was immediate: half of all approvals to date made in March & April
- Source of funds **predominantly from savings** (>90%); very little reprogramming was used
- Use of savings is attractive for countries: funds are **readily accessible** for COVID-19 responses and are **usually already in-country**

Our grant flexibilities have provided rapid support to countries since March to mobilize resources to fight COVID-19 (2/2)

Grant flexibility amounts approved in 2020 per period, blue bars = total



- Total approved: **\$217 million** (by 23 October 2020)
- **342 grant flexibility** approvals, **94 countries** & **13 regional** grants; covering all Global Fund Regions
- **Funding has gone towards the expected activities:** infection control, diagnosis, information campaigns and training, protecting Global Fund disease programs
- While the average of approved amounts is **much smaller** compared to C19RM approvals, grant flexibilities provide a **very fast decision-making** process in reaction to emerging needs. Most countries have used flexibilities **more than once**
- July approvals were offset by **adjusting earlier decisions** where former grant flexibilities are now financed through C19RM, thus **balance is zero**

C19RM has provided \$594 million in funds to Global Fund-supported countries fighting the pandemic

In addition to the \$217 million of grant flexibilities, the Global Fund has approved a total of **\$594 million for C19RM (by 23 October 2020)** to support the COVID-19 response.

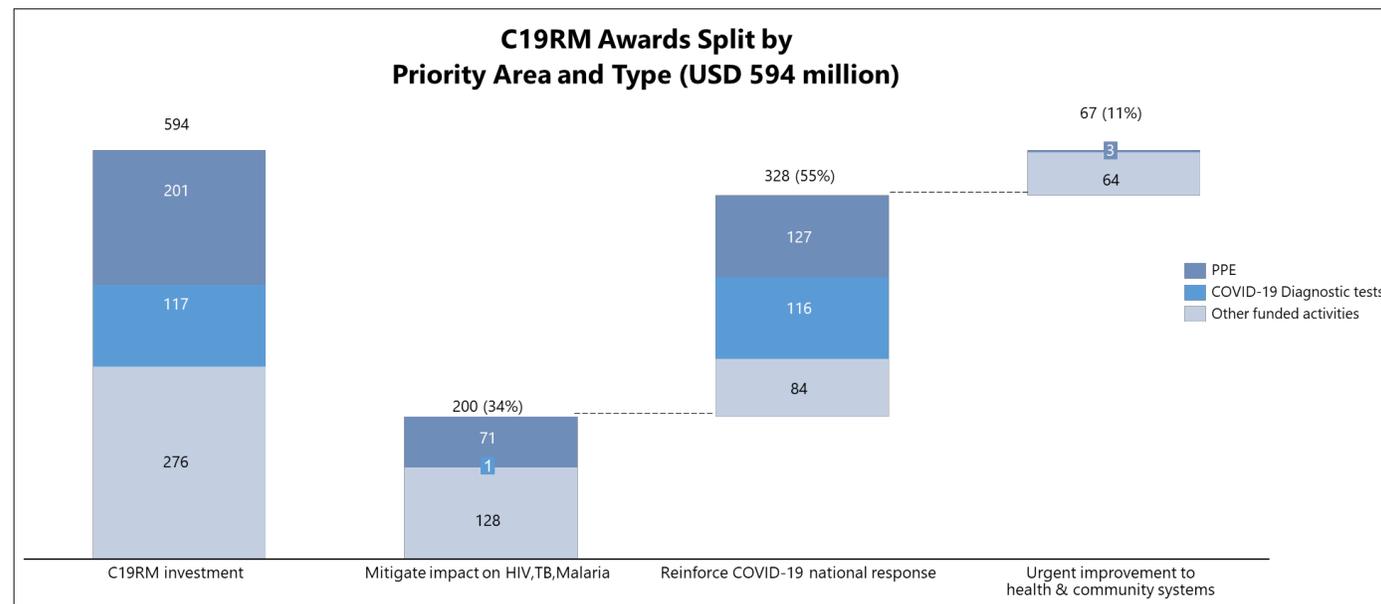
\$594 million from C19RM has funded:

- \$200 million (34%) for mitigating COVID-19's impact on HIV, TB and malaria programs;
- \$328 million (55%) for reinforcing national COVID-19 responses; and
- \$67 million (11%) for urgent improvements in health and community systems.

The target of approving \$500 million by 31 July was achieved successfully.

This also includes funding of **\$117 million for COVID-19 diagnostics** and **\$201 million for Personal Protective Equipment (PPE)**.

All awards have been consistent with WHO technical guidance and were made based on Country Coordinating Mechanism (CCM)-endorsed requests



Selected country cases show how Global Fund resources have directly supported countries in the COVID-19 environment (1/2)

Burkina Faso (HIV)



- The network of **17,000 CHWs**, supported by the Government of Burkina Faso and the Global Fund, was **trained and mobilized for COVID-19** contact tracing at community level.
- The Government, the CSO PR for the GF grant and community representatives **met together** to prepare the contingency plan for **continuity of services**, and submitted a joint order for PPE.

Panama (HIV)



- Since April 2020 Panama has supported **ARV home delivery**. With financial support from the **Global Fund**, PEPFAR and other donors, Panama is working with peer navigators and fast delivery transport companies to **deliver treatment to PLHIV to homes** across the country.
- For those who still want to pick up treatment from health facilities, the **delivery schedules are maintained**.



A community health worker in Ziniaré district, Burkina Faso

Selected country cases show how Global Fund resources have directly supported countries in the COVID-19 environment (2/2)

Myanmar (TB)



- Patients in Myanmar with suspected COVID-19 infection are also **receiving a chest X-ray** to detect TB.
- In addition, TB patients receive medication **for three months** to avoid multiple visits to health facilities. Patients are monitored through **mobile phone calls** to avoid crowding in health facilities.
- **All staff** in direct contact with TB patients received **personal protective equipment**.
- Sputum transportation was strengthened so **to avoid that presumptive patients** need to visit testing sites.



Healthcare professionals at a TB hospital in Myanmar

COVID-19 response risks: There are still various key risks that we are actively mitigating

Risk	Risk Drivers		Mitigation Plans
Inadequate resources to support adequate response to COVID-19	<i>Demand and supply side constraints for COVID-19 health products:</i>	Challenges in demand planning and forecasting given the evolving nature of pandemic. Supply side constraints and challenges in securing sufficient volumes of highly demanded health products for low and middle income countries	Global Partnership as part of ACT Accelerator Leveraging Global Fund business for preferential supplier agreements
	<i>Evolving nature of COVID-19 response and mitigation plans:</i>	Shift from <i>mitigating impact of lockdowns</i> and travel restrictions to <i>mitigating impact of COVID-19 on service delivery</i> including catch-up plans, innovations for community engagement, and addressing human rights- and gender-related barriers to seeking health services	Maintaining agility and flexibility with C19RM and grant flexibilities
Competing priorities and diversion of attention from core mission	<i>Operational burden on Secretariat/Partner/CCM attention:</i>	Competing priorities to implement current grants to maximal potential, developing ambitious and quality funding requests and finalizing grant revisions to incorporate C19RM funds	Streamlining decision-making process and extension of BCP flexibilities only where necessary BCP and end-to-end C19RM monitoring as an early warning tool
Rapid deployment & Limited control on downstream dependencies	<i>Warehousing, distribution and use of Dx/PPE (funded by grant flex or C19RM):</i>	COVID-19 diagnostics and PPE prone to misappropriation due to high demand and limited supply. Procurement related risks (quality, fair pricing, irregularities) for in-country procurements	Use of national systems for warehousing and distribution Preferential use of Wambo / PPM / UNICEF channels Risk based targeted reviews by LFAs
	<i>Use of funds and absorption:</i>	Risk of diversion of funds and low absorption perceived to be low	All C19RM investments governed by same assurance framework as parent grants

To mitigate the risks to our COVID-19 response, various activities are put in place to ensure proactive monitoring and risk assurance

Monitoring the situation and impact

- **Global Fund COVID-19 Country Monitoring Survey** is completed by Local Fund Agents every 2 weeks from the beginning of May for 106 countries consolidating the views of various in-country stakeholders. It identifies potential risks and disruptions to programs due to COVID-19.
- **A sub-set of performance framework indicators** will be reported by PRs monthly in 39 selected high-impact and core countries contributing the most to Global Fund results. This will provide additional monthly monitoring of COVID-19 disruptions to service delivery for HIV, TB and malaria in Global Fund-supported programs.
- **Spot checks to verify the level of disruptions to service delivery caused by COVID-19 at facility and community level** will be conducted by LFAs in 38 selected high-impact and core countries in Q4 2020-Q1 2021.

Adapting and tailoring assurance activities

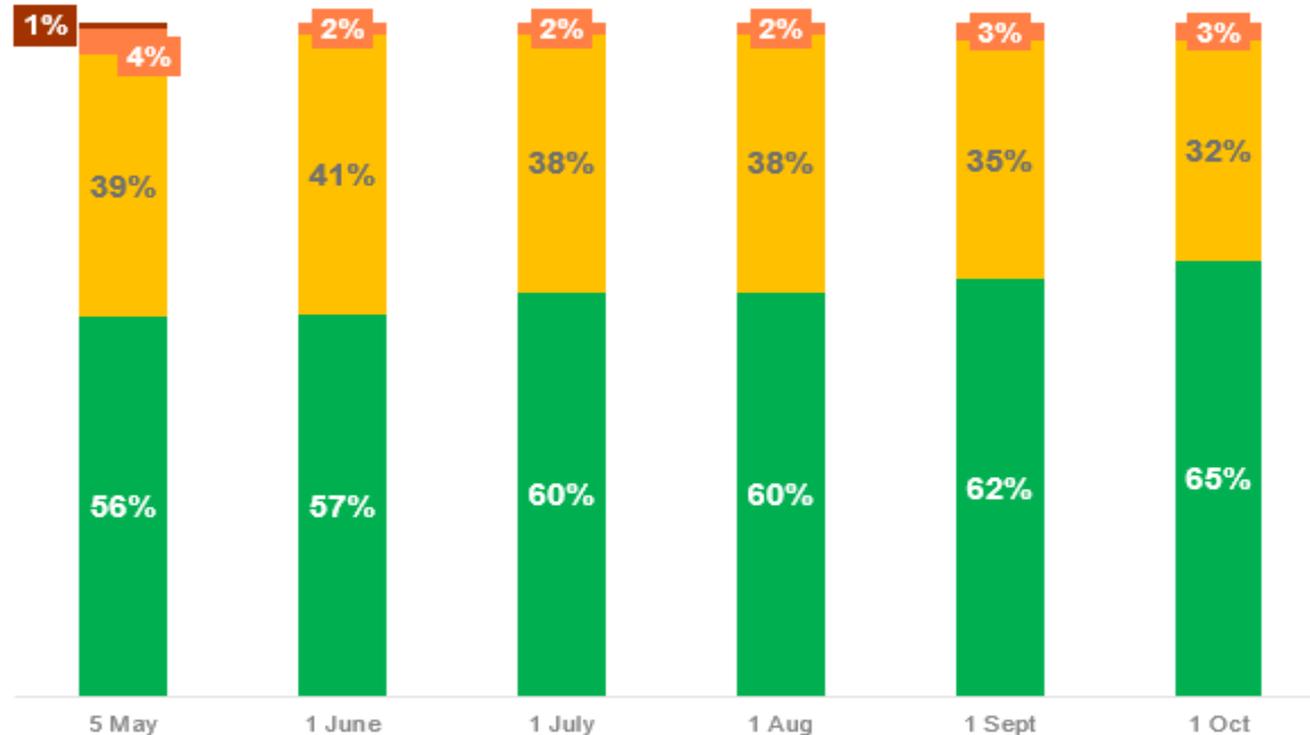
- **LFA Guidance on Risk and Assurance, including Financial Risk Management, during COVID-19** was released. It outlines contingency measures to address challenges in executing assurance activities caused by COVID-19 disruptions, including risk-based prioritization of LFA services and aligning assurance activities with any new emerging risks and challenges, mitigating impact of delays and facilitating remote reviews.
- **GF's Grant Operating System was updated** to monitor LFA verifications pending due to COVID-19 disruptions.

Assurance over new activities / funding

- **LFA Guidelines for COVID-19 Funding related assurance activities** were released. They provide guidance on various assurance activities to be performed in countries which receive COVID-19 funds, whether through C19RM or grant flexibilities, special emphasis is placed on the assurance with respect to funding area *Actions to reinforce the response to COVID-19*, in particular procurement reviews in case of local procurement, supply chain and service delivery reviews for all goods/services/treatments.

We are also seeing that the majority of Local Fund Agents are experiencing low or moderate levels of disruption in their services

To what degree are the LFA services and deliverables impacted by the COVID-19 pandemic*



- Very high – LFAs' capacity below 25%.
- High – LFA's capacity between 25% - 50%.
- Moderate – LFA capacity is between 50% - 80%.
- Low - Most services can be completed

Key points

- Local Fund Agents continue to provide assurance services with 99% experiencing low or moderate levels of disruption of their services. Currently only one country is experiencing a high level of LFA capacity disruption.
- Travel restrictions (68% of countries) and access to information (47% of countries) continue to be the key barriers affecting timely delivery of LFA services.
- As of 30 September 2020 the LFA service completion was on a similar level compared to the same period in 2019 even though in some cases LFAs had to adjust their way of working to respond to the COVID-19 challenges.

Lessons learned from the few months of C19RM deployment indicate our support remains critical to countries

Lessons are reviewed on a regular basis to inform process streamlining and improvements

Lessons learned so far from the first few months of C19RM include:

- **Launching two complementary mechanisms** was a useful way to **balance need for emergency interventions and more robust processes**.
- **C19RM** was slower than anticipated to get going, but has been **highly effective in converting funding requests into approval decisions**: While it took 55 days to set up the more robust processes for C19RM, the turnaround time of 10 days from start of funding request review to the applicant being notified of the decision is achieved in 81% of the cases.
- Requiring that **C19RM funding requests be channelled through CCMs has been vital**, but also not without **challenges**: this ensured inclusivity of the process, but preparing funding requests during lockdowns and some cases of CCMs not sufficiently in tune with the national responses presented challenges.
- **Countries' perceptions of their needs are evolving as the pandemic progresses**, which is noted in the quality of the funding requests: As countries gain a better overview of their response needs, including for diagnostics and PPE, the quality of funding requests increases.
- Some of the Global Fund's **operational processes need further streamlining and adaptation to enable the speed and flexibility required** in a crisis and to minimize transaction costs. Incorporating C19RM funds in regular grants through grant revision has been more burdensome and time-consuming than anticipated. A deep-dive identified methods to further streamline processes and increase efficiency, while also permitting for reprogramming with C19RM Investment Committee oversight, to adapt to evolving pandemic

Using the Global Fund's pooled procurement mechanism on the Wambo requisition platform for C19RM has helped countries and Principal Recipients access COVID-19 commodities

Background and context:

- During the initial phase of the COVID-19 pandemic, the Global Fund **decided to make Wambo available for countries** to procure high-performing COVID commodities in order to balance the need to **respond quickly** while providing **visibility, control and compliance**
- Wambo has allowed PRs to get immediate **access to GF existing supplier agreements** (e.g., Abbott, Cepheid, SD Biosensor Dx tests) and **procurement platforms** (e.g., UNICEF)
- From May until August, WHO designated Global Fund as the **sole procurement channel for Abbott and Cepheid COVID-19 tests** for GF-eligible countries (UNICEF was the sole channel for Roche and Thermo Fisher tests)
- For other products, including antigen rapid tests, personal protective equipment (PPE) and oxygen, Principal Recipients are encouraged but not required to use Wambo

Key insights:

- **3.2M** diagnostic tests procured through Wambo (2.2M PCR and 1M RDTs) with total value of **\$49M**
- **\$67M** of Personal Protection Equipment (PPE) procured through Wambo
- **78** countries used Wambo for C19RM procurement for diagnostics (70 countries), PPE (43 countries) and Oxygen (3 countries), all using Global Fund grant funds

Agenda

Recap of the COVID-19 context

The Global Fund's response

(a) Keeping our people safe

(b) Protecting our core mission

(c) Helping countries we invest in respond to COVID-19

(d) Our role in the global COVID-19 response

Looking ahead

The GF and its Partners have continued to support countries to procure critical COVID-19 related commodities

1 Diagnostics

In-scope products (focused on tests):

- COVID-19 PCR tests
- Instruments
- Testing software
- Swap & extraction kits



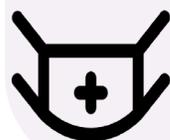
Partners involved:
WHO Dx Consortium

2 PPE

In-scope products:

Health equipment such as:

- Face masks / shields
- Protective clothing
- Gloves
- Goggles



Partners involved:
UNICEF

3 Therapeutics

In-scope products:

Approved therapeutics



Partners involved:
ACT-A Therapeutics Pillar

4 Oxygen

In-scope products:

- Oxygen therapy (e.g., ventilators)
- Oxygen concentrators



Partners involved:
UNICEF

Partner collaboration

- Continuing to leverage our **Partnerships** (e.g., WHO Consortium & ACT-A across diagnostics, therapeutics and the Health Systems Connector) – a few specific examples:
 - Gates Foundation and others have reserved capacity of **120M** antigen rapid tests (Ag RDTs) over 6 months
 - Collaborating with UNICEF to procure Ag RDTs and therapeutics

COVID-19 procurement by the numbers:

- Procured **2M+** diagnostic tests (Abbott & Cepheid) as part of WHO Dx Consortium
- Made available **\$200M+** for PPE through C19RM, which countries are procuring locally and via PPM (UNICEF)
- Beginning to procure **up to \$50M** in antigen RDTs (**~10M tests**) for low- & middle-income countries globally

And we have taken initial actions based on lessons learned from the Global Fund's COVID-19 commodity response thus far

Reminder: Takeaways from July

- As we move past **the initial emergency phase**, the Global Fund should try to **return towards a more business-as-usual approach**
- We must **make strides to adapt our current processes** while **using surge resourcing to ensure value delivery** across the three diseases and COVID-19

Actions we have taken

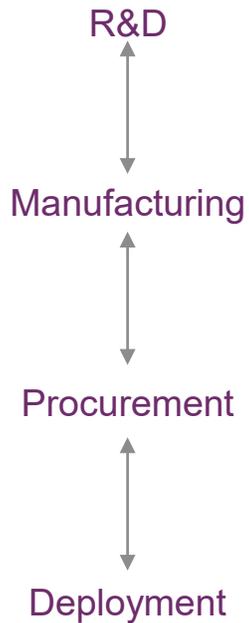
- The Global Fund is working with other Partners in the Consortium to move to a **coordinated procurement approach**, which will help the Consortium work more effectively with suppliers to allocate constrained volumes
- We improved the diagnostic **allocation model** with feedback from countries on their **testing capacity**
- We have **approved surge resources** within Supply Operations to support the COVID-19 response

The Global Fund is also a founding partner of the ACT-Accelerator and is playing a leading role in its operations

Global Stewardship ACT-A Council

Facilitation group to oversee & report progress, mobilize resources, engage with stakeholders
Public sector and private not-for-profit partners, such as:

- EU, Canada, France, Germany, Italy, Japan, Norway, Spain, UK
- BMGF, WEF, Wellcome Trust, coordination hub from WHO




Vaccine Partnership
CEPI (co-convener)
WHO (lead on product allocation)

- Research
- Foundations
- International organizations
- Industry
- Funders
- Regulators
- CSOs

GAVI (co-convener)



Therapeutics Partnership
Therapeutics Accelerator (co-convener)
WHO (lead on product allocation)
Global Fund (lead on procurement and deployment)

- Research
- Industry
- Regulators
- Funders
- International organizations
- CSOs & communities

UNITAID (co-convener)



Diagnostics Partnership
FIND (co-convener)
WHO (lead on product allocation)

- Research
- Industry
- Regulators
- Funders
- International organizations
- CSOs & communities

Global Fund (co-convener)

Health Systems Connector **World Bank & Global Fund** (co-convener)

The Secretariat developed a COVID-19 community and civil society engagement mitigation plan (1/2)

The Secretariat developed an internal plan to **mitigate the impact of COVID-19** on **community & civil society engagement** in Global Fund processes.

The objectives are:

- 1 Maintain **robust community & civil society engagement** in country dialogues, funding request development and grant-making
- 2 Monitor **human rights violations** and access to services
- 3 Maintain **community and civil society advocacy**
- 4 Ensure **meaningful engagement** in the development of the next **Global Fund Strategy**
- 5 Engage **private sector partners** to support safe virtual engagement



The Secretariat developed a COVID-19 community and civil society engagement mitigation plan (2/2)

Community and civil society engagement and responses on COVID-19

Engagement in Global Fund processes

- CRG Regional Platforms have engaged in a range of regionally specific activities to monitor impact of COVID-19 on communities and services, as well as share best practices for overcoming challenges
- GMD held 7 Civil Society Roundtables to hear from communities and civil society on how they are adapting during COVID-19 and what challenges they face; a global civil society roundtable to share cross-regional perspectives scheduled for 5 November.
- A survey was distributed with the CCM Hub to obtain feedback on GF efforts to engage communities and civil society in C19RM; finding will be discussed on a series of calls with communities and CS in October. The survey was sent to over 1800 CCM members from Civil Society/Community and distributed by the CRG Regional Platforms. **283 people** from civil society/community responded. The survey was available in Spanish, French, Portuguese and English..
- The PCSA team has engaged civil society/community in resource mobilization for C19RM to support national responses.

Virtual community engagement

- Providing **virtual technical assistance** through the CRG Strategic Initiative and the Human Rights Strategic Initiative to enhance meaningful engagement of communities
- The Executive Director held 3 virtual meetings with GF Youth Council to discuss experiences during COVID-19 and perspectives on the post-2022 Strategy.
- Strategy Development: Adapting approach to community/CS engagement in light of COVID-19 limitations; Secretariat regularly participating in community/C.S.-led virtual Strategy consultations; increased participation anticipated throughout Q3/Q4
- Virtual pre-meetings being planned for January 2021 to support engagement of community and civil society members attending GF Strategy Partnership Forums
- We are working with PCSA, SPH, L&G, CCM Hub, IT and PSE to identify internet connectivity solutions for community and C.S. members participating in 2021's Partnership Forums

Engagement with media and Partners

- We provided funding to develop GNP+ +Voice platform in partnership with UNAIDS, WHO, UNICEF, Avert, Aidsfonds, and Y+ Global. Launched in Q3.
- ACT-A: The Global Fund has played a leadership role in supporting the principle and roles of civil society and community engagement across streams and generating dialogue across key actors from communities
- PCSA allocated resources to civil society for ACT-A engagement, including supporting the Pan African Network of COVID-19 survivors to document their experiences
- ACT-A HSx: The GF co-convenes this pillar and co-leads the Community Responses workstream within it. The workstream focuses on ensuring ACT-A is cognizant of roles of community/CS in the delivery of COVID-19 tools and the broader COVID-19 response and ensures community responses support provided is "Joined up"
- To date: Costed cross-cutting support to community /CS responses to COVID-19; Mapping where CS/Com responses are relevant and priority used; Organized joint meetings between workstreams in ACT-A working on similar community elements. Next steps: Series of meetings where community led organizations can present experience as relevant to different pillars and propose of support mechanisms for community responses

Agenda

Recap of the COVID-19 context

The Global Fund's response

Looking ahead

Resource mobilization efforts have been ongoing throughout the course of the year...

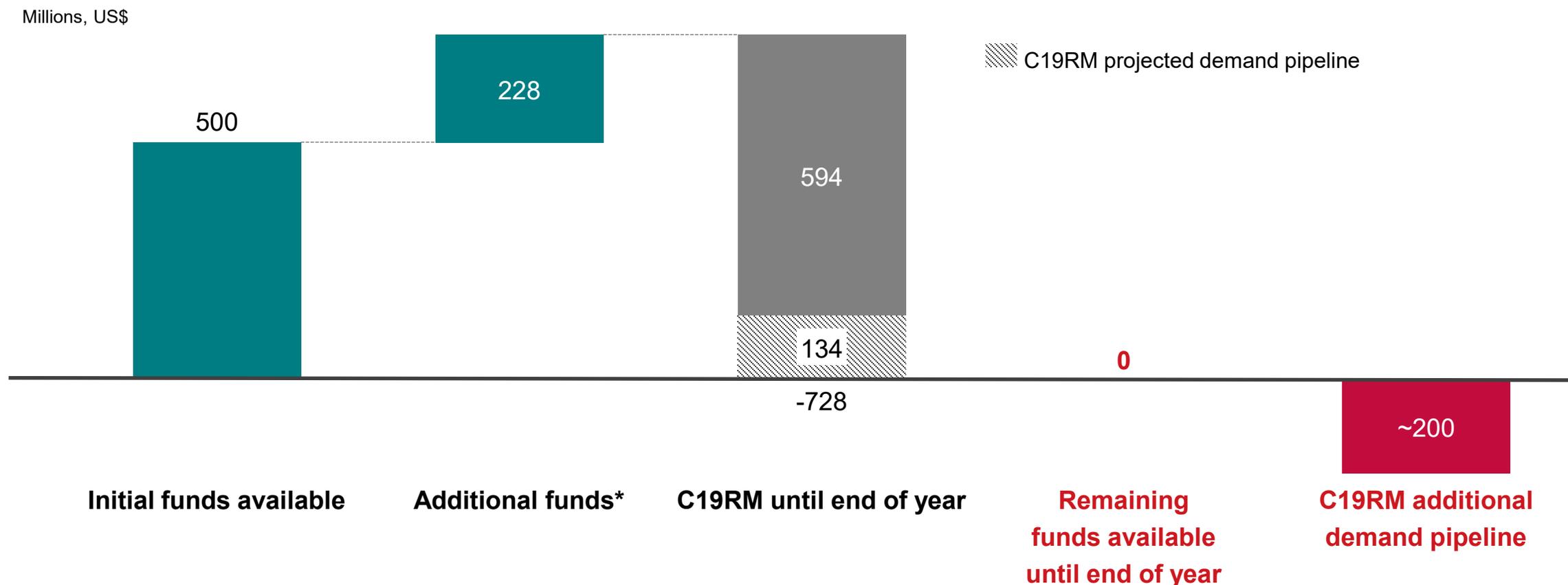
Ongoing resource mobilization for COVID-19 response

- *Pledges made from donors:* Since last discussed, pledges for the COVID-19 response have included Germany, Canada, Denmark, Italy, Sweden and FIFA
- *Additional funds:* These additional pledges will result in additional funds **amounting to approximately USD 228 million for C19RM***

6th Replenishment conversion**

- To the end of September, over **US \$5.6B in agreements signed against the pledges announced for the 6th Replenishment** with 31 out of 58 public donors having so far signed mostly multi-year contribution agreements (expected to increase before the end of the year)
- **22 public donors have paid their 2020 contributions** in full (15) or in part (7) with others expected to make their payments in the coming months
- The Secretariat continues to **closely monitor and actively mitigate risks** related to pledge conversion

... but despite playing our part with the resources we could mobilize, C19RM funding is now running out



- Based on the Global Fund’s projections, the current funding – including through ACT-A – is expected to be deployed by **the end of the year**
- Additional contributions are **critical** to continue **fighting the pandemic** in Global Fund-supported countries
- Given the remaining pipeline of demand, the Board approved an extension of the C19RM mandate till 15 April 2021

* Subject to AFC approval of an additional amount of USD 53 million as available sources of funds (GF/AFC14/EDP02), and an additional USD 10 million, to be submitted by the Secretariat for a further AFC decision

The Global Fund needs further resourcing in order to fight COVID-19 and protect the gains on the 3 diseases

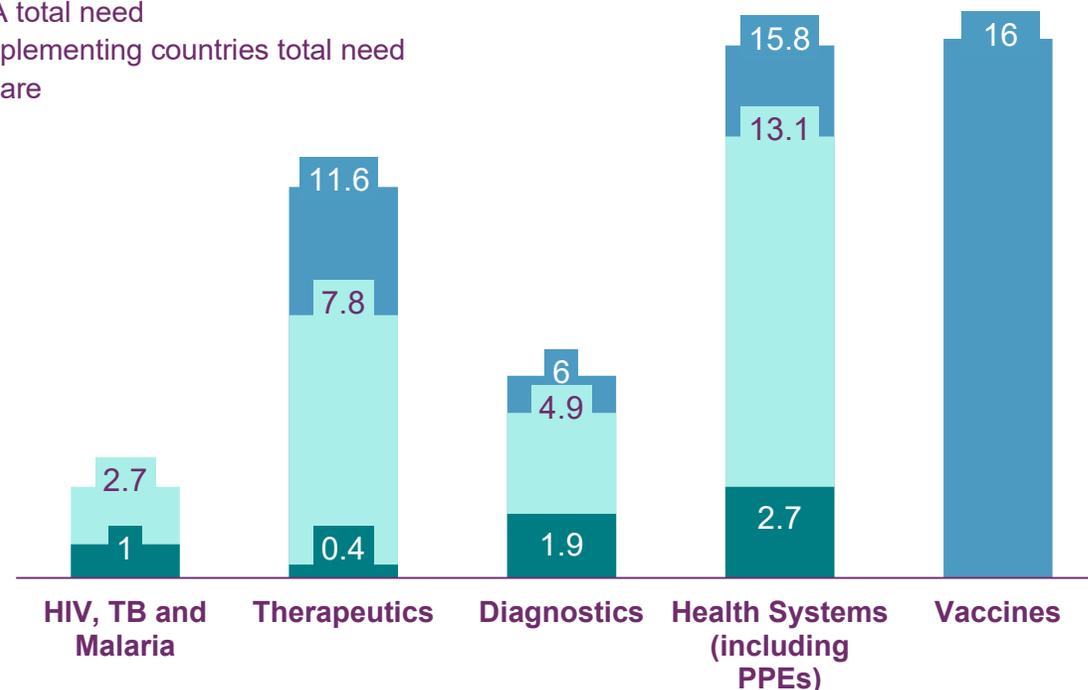
GF funding need for COVID-19

- As stated in the Global Fund’s **June 2020 report** on “**Mitigating the impact of COVID-19 on AIDS, TB and Malaria**”, the Global Fund still needs **~\$5 billion** to **mitigate** the impact of COVID-19 on the **3 diseases**, **boost** national COVID-19 response **plans**, and **urgently improve** health and community **systems**
- Without this funding, we risk **falling behind** on our **core mission** and fail to deliver on the Global Fund’s 2017-2022 **Strategy targets** as health and community systems **are overwhelmed**, treatment and prevention programs **are disrupted**, and resources are **diverted away** from core programs
- It is critical for us and our partners to **mobilize** – **we must Unite to Fight**

GF mitigation plan as a part of ACT-A total need

Note: All figures in USD billion

- ACT-A total need
- GF implementing countries total need
- GF share

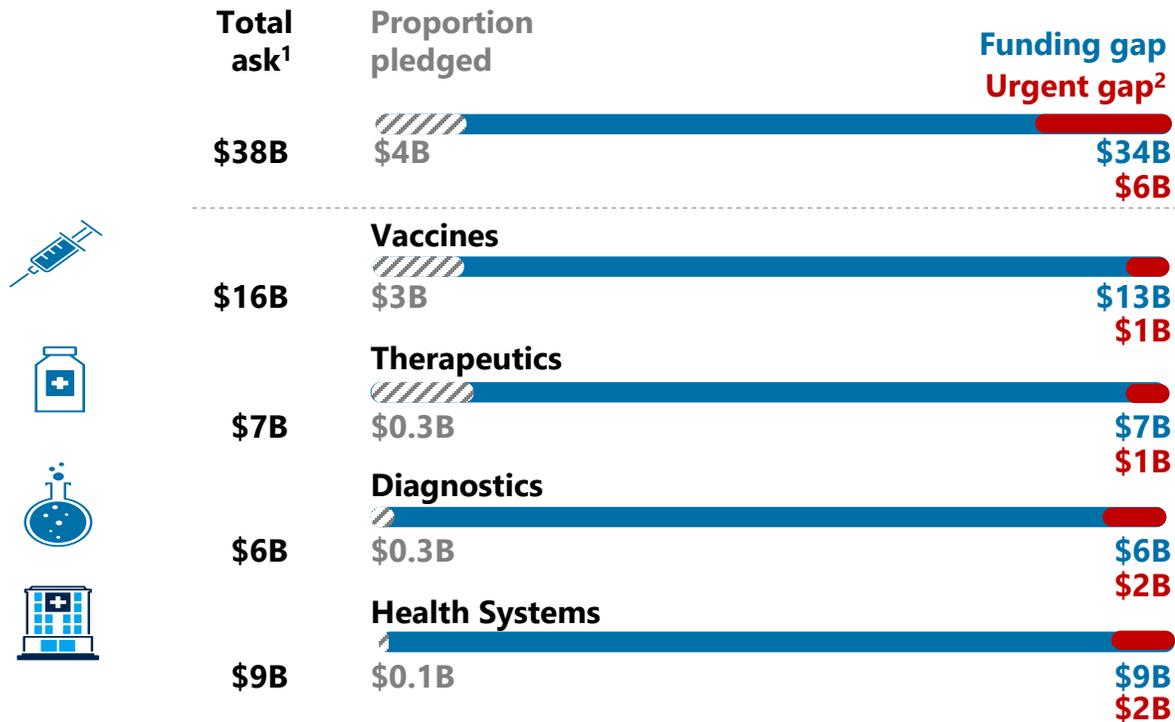


GF share adds to \$6 billion; our current funding stands at ~\$1 billion, thus ~\$5 billion still required

Note: ACT-A therapeutics total estimated need is US\$11.6 billion, including community and domestic contributions. Out of this, the total ask of ACT-A is US\$7.2 billion. For more information, please refer to [the ACTA Tx Investment Case](#). ACT-A health systems total estimated need is US\$15.8 billion. Out of this, the total ask of ACT-A is US\$9 billion.

We must mobilize additional resources to continue to play our part in ACT-A

ACT-A total ask and funding gap



Why is an increase in ACT-A funding needed?

- Trillions are being allocated to address COVID-19’s **economic and social impact** in HIC, but overall investments to **address the disease itself** have remained modest
- Of the estimated **\$38 billion** ACT-A “ask” across vaccines, therapeutics, diagnostics and health systems tools, only **~\$4 billion – about 10% – has been committed**
- If funding does not increase significantly, COVID-19 will likely **continue to spread**, with the **human & economic costs** continuing to spiral. The **poorest and most vulnerable** will be left behind and **unable to access** existing & new tools to fight the pandemic

1 As of 21 September 2020

2 Currently being reviewed by co-conveners ahead of the 2nd Facilitation Council Meeting

Source: [An economic investment case & financing requirements September 2020 – December 2021](#)

Going forward, COVID-19 remains a crisis and remains a major threat to the Global Fund's mission

- As mentioned during past Board calls and in past Committee discussions, **COVID-19 is still a crisis**. It continues to cause difficulties in the countries we support, and disruptions to the Global Fund staff.
- To keep progressing against the 3 diseases **in a crucial year** when an **implementation cycle is ending** and a new **grant cycle begins**, the Global Fund must **keep its focus** on **mitigating COVID-19's impact** on AIDS, TB and malaria – the extension of Business Contingency Plans will help with this.
- We will maintain our **four-pronged approach to mitigate risks & impact on our core mission programs**, with the need to maintain or scale up COVID-19 related mitigation responses **reflected in the 2021 OPEX budget**.
- The Executive Director will continue to **update the Board** on our **approach to COVID-19** across the various pillars through **regular calls and reports** as, past updates **have been well-received**.
- We will **return to the Board** if over US\$500 million in **additional contributions are secured**, or if any **extensions are required** beyond the spring of 2021.
- Support from the Global Fund's **partners is critical** if we are to remain on track to accomplish our mission of **ending AIDS, TB and malaria as epidemics**.

