



## **Georgia Country Coordinating Mechanism**

**Reporting period: February 29- May 31, 2016**

**The report outlines the main activities performed by Georgia CCM in the period covering  
March- May 2016**

### **Background**

Georgia Country Coordinating Mechanism (CCM) is a central mechanism for implementing Global Fund supported TB and HIV programs in Georgia. CCM creates a multi-stakeholder platform for country ownership and participatory decision making on HIV and TB related policy and programmatic issues. Georgia CCM includes representatives from both the public and private sectors, including government organizations, multilateral or bilateral agencies, non-governmental organizations, academic institutions, private businesses and people affected by and living with the diseases. CCM's operations are regulated with the Government resolution #220 as of June 18, 2012 and the CCM Governance Manual effective from June 1<sup>st</sup>, 2015.

### **CCM membership renewal**

As per decision of the 81<sup>st</sup> CCM meeting the re-announcement for the following seats in the CCM was made: HIV KAP (other), HIV KAP (other), 1 TB NGO and PLHIV. The Ministry of Finance and Ministry of Corrections were approached by the CCM leadership with the request to nominate candidates for CCM membership. At the 82<sup>nd</sup> CCM meeting the elections of new CCM members were held as planned.

### **Oversight activities/CCM meetings**

On March 7, 2016 the CCM Oversight Committee hold a meeting with the PR to discuss HIV and TB dashboards for Period 7 (October 1, 2015 – December 31, 2015).

The recommendations for the dashboards for P7, the OC report covering period December 2015 – February 2016, the status of GFATM grant implementation were presented to the CCM at the 82<sup>nd</sup> CCM meeting held on March 9, 2016.

**Actions taken:** The issue of underachievement of the HIV programmatic indicator: “# and percentage of IDUs reached with HIV prevention program as revealed by the analysis of HIV dashboard for P7 was under close follow up. On April 26, 2016 the meeting dedicated to the assessment of the mobile ambulatories (MAs) practice was held in the PR office. The piloting period of MAs, achievements and challenges were analyzed during the meeting. The outcomes of the meeting were shared with the CCM. The current overachievement of the indicator (as revealed by dashboard P1, 2016) might be caused by successful implementation of mobile unit practice in the program. P2, 2016 and overall results for the first six months of 2016 will reveal more validated results. Programmatic indicator: # and percentage of MSM and FSW reached with HIV prevention program was also followed up. The disaggregated data were received from the PR and shared with the CCM. Semi-annual achievements in P2 will enable accurate analysis of progress towards GF approved targets. Overachievement in programmatic indicator (FSW) is caused by increased regional coverage with regional outreach activities.

As many clients of harm reduction program were complaining for the quality of 1ml syringes procured by the PR through the IDA, a mini-survey was conducted by GHRN to document the reasons for dissatisfaction. The results of the study were shared with the OC and the CCM.

The PIU has conducted the quarterly post-supervision meeting with TB Managers. The programmatic indicator: % of laboratories showing adequate performance in external quality assurance for smear microscopy was discussed. The issue was further presented at the OC meeting on May 30, 2016. The indicator to be improved by the next reporting period

The OC meeting dedicated to discussion of HIV dashboard for Period 1 (January 1, 2016 – March 31, 2016) and TB dashboard for Period 8 (January 1, 2016 – March 31, 2016) was conducted on May 30, 2016. The OC recommendations will be presented to the CCM on June 15, at the 83rd CCM meeting.

During the reporting period one CCM meeting was convened (82nd CCM meeting, March 9, 2016).

## **OC membership renewal**

The future steps and procedural norms to proceed with the renewal of OC were presented and agreed at the 82nd CCM meeting. The nominations were made. The discussion/endorsement of the renewed composition is planned to be held at the 83rd CCM meeting scheduled for June 15, 2016.

## **Orientation for new CCM members**

On April 5, 2016 orientation meeting for new CCM members was convened. New CCM members were inducted to the mode of operation and main principles of the CCM including aspects of the oversight.

## **Transitional Planning**

### ***Policy and Advocacy Advisory Committee (PAAC)***

With the purpose to ensure smooth transition from the Global Fund to the state funding of the TB and HIV programs the CCM established the Policy and Advocacy Advisor Council (PAAC) with the mandate to assist CCM in identification of challenges of a transition period and to advise on potential solutions. The composition of PAAC was endorsed at the 82<sup>nd</sup> CCM meeting. PAAC is composed from representatives of the main stakeholders including governmental representatives, international partners, KAPs, people living with the diseases, and civil society organizations working in the fields of TB and HIV. The PAAC will engage in advocacy efforts aimed at improvements in legislation, regulations, operational policies and practice standards related to TB and HIV prevention and service delivery. The key role for the PAAC is to guide the development of a transition and sustainability plan aimed at ensuring universal access to quality HIV testing, prevention, care and support and TB diagnostic and treatment services with domestic resources. The plan will provide a detailed framework for handover of the activities currently supported by the Global Fund to the state including the necessary regulatory changes for ensuring the effective transition for both TB and HIV programs. PAAC has a technical and advisory but not a decision-making role. Decisions on specific topics considered by the PAAC will be made by relevant governmental agencies as per their mandates. The PAAC has become fully operational and two meetings (On April 20, 2016 and on May 16, 2016) have been conducted during the reporting period. Currently the first outline of the transition and

sustainability plan developed by expert team of Curatio International Foundation has been reviewed by the Council and will be presented to the CCM at the next CCM meeting scheduled for June 15, 2016.

### ***CCM integration study***

On May 10-17 Euro Health Group has conducted CCM Integration Study in Georgia. The study was financed by the Global Fund and GIZ BACKUP Initiative and has been implemented in five countries. At the workshop held on May 17, 2016 Study Team's findings and options for CCM evolution were presented and discussed. The participants of the workshop discussed a road map for CCM evolution and needed technical support

### **GFATM grants**

NFM GEO-H-NCDC grant has been approved by the Global Fund Board. The grant making process for TB grant is on-going.

***June 10, 2016***

***The report is prepared by Georgia CCM Secretariat***