



## **Georgia Country Coordinating Mechanism**

**Reporting period: June – August 2017**

**The report outlines the main activities performed by Georgia CCM in the period covering June – August 2017**

### **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 1st, 2015.

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

On June 17, 2017 the Oversight Committee conducted site visit to TB Mobile Ambulatory. The visit was aimed at study closely the GFATM supported TB MA pilot project; monitoring TB treatment service delivery; identification of possible challenges of program implementation and set up the ways of their addressing. Pilot project implementation staff and program beneficiaries were interviewed during the visit.

#### *CCM Meetings*

One CCM meeting was held during the reporting period (87th CCM meeting, August 7, 2017). The current status of implementation of the Global Fund's projects, the report of the Oversight Committee, dashboards recommendations, the Global Fund Allocation Letter, funding application approaches, the role of the PAAC in the process of preparation of funding requests were discussed. Important outcomes of the meeting: selection of Programs Continuation Requests for HIV and TB grants as an application approach; decision on submission of two separate applications (HIV and TB); assigning to the PAAC a role of the platform in the development of the requests. In order to ensure broad country dialogue with an active involvement of all stakeholders, especially those representing KAPs and vulnerable populations in the working process the CCM it was decided to expand the composition of the PAAC. The members were requested to disseminate this information among interested parties; the corresponding announcement was published on the CCM web-site.

### **Transitional Planning/TSP**

The information note on TSP was prepared by EHRN and ECOM aimed at assessing gaps and issuing recommendations. The online tool was developed.

### **Transitional Planning/CCM Evolution Plan/PAAC**

On 26-30 June, 2017 Mr. Tim A. Clary and Ms. Sanja Matovic, EHG consultants visited Georgia to conduct consultations on elaboration of CCM transition plan with relevant stakeholders. During the visit broad range of stakeholders, including those representing Gov. sector, International organization and CSO were met and interviewed. The consultants met with the CCM Chair, Vice-Chair and the Chair of PAAC. The visit was a follow up to the CCM Study conducted in five countries (Ethiopia, Georgia, Ghana, Guinea, and Moldova) and to move forward to CCM transition plan development.

The 9th PAAC meeting was conducted on June 28, 2017. The objectives of the meeting were: to inform the group members and discuss on the CCM transition plan outline presented by EHG consultants; to define the PAAC role in the development of the CCM transition plan and outline modus operandi of the group. It was decided that PAAC will be the main platform and initiate discussions on CCM transition plan and provide recommendations to the CCM and the consultants (as previously agreed by the CCM); The next meeting of PAAC was convened on August 11, 2017 to discuss the main strategic scenarios/options for CCM transition envisaging the future regulatory framework, structure, functions and financial mechanisms of the CCM. PAAC initial recommendations were afterwards shared with the CCM for feedback. The CCM has also agreed on the draft CCM Transition Plan outline which will constitute the basis for the plan.

### **Elaboration of Funding Requests/PAAC**

Planning Meeting on Program Continuation Request Development was conducted on September 22, 2017. It was agreed that Policy and Advocacy Specialist will finalize PAAC work plan for Program Continuation Request development; GF PIU will present programs utilization data and midterm expenditure figures to PAAC to inform discussions for Program Continuation Request development. The meeting agreed on 3 main deliverables for the Program Continuation Request development: (1) validate program continuation ; (2) decision on program split and (3) complete and circulate applicant self-assessment checklist.

In its aspiration to develop the requests in transparent and open format ensuring the meaningful participation of all stakeholders especially those representing KAPs and vulnerable populations and following the decision of the 87th CCM meeting the CCM announced expansion of the PAAC composition. All those who expressed the willingness to participate were included in the PAAC .

### **TB Clinical Research Coordination Working Group**

No meeting was convened during the reporting period.

The status of on-going and upcoming clinical studies at the National Center for Tuberculosis and Lung Diseases for the period of 1st June – 30th of September is the following:

### ***endTB***

In December 2016 the agreement within endTB 2nd component was signed between TB Center and MSF. The study is in an active phase of implementation.

Study subject enrolment status by September 30 is the following: Total 12 patients were screened for eligibility and out of 12, 8 patients were enrolled. One patient was withdrawn from the study (early withdrawal) the remaining 7 are currently on treatment.

Sponsor and local in-country monitor have conducted the monitoring visits in September.

### ***STREAM***

The approval from MoLHSA and Local Ethic Committee was received; the initiation of the site and protocol training has been performed; the agreement with the Sponsor was signed. Site is officially open to start screening of first eligible patient.

### ***STAND***

Among two enrolled patients on Georgian site, one was withdrawn (early withdrawal) due to the decision of Study Clinical monitor. Second patient has conducted last follow-up visit on 1st September. Patient has been cured and had successfully completed all study visits.

Last monitoring by local Monitor in the frame of the project was conducted on September 7th.

Study will be closed at all sites in December 2017.

### ***NIX-TB***

Sponsor took a decision that NIX-TB will not be started in Georgia due to the delay in obtaining approvals on-time. Parties agreed to proceed with next study, ZeNIX-TB.

### ***ZeNIX-TB***

The approval from MoLHSA and Local Ethic Committee was received; Agreement between parties (TB Alliance represented by CRO, PPD and NCTLD) is planned by October 10. The initiation of the site and protocol training will take place in two stages, 1st stage - training is planned on October 12 and second stage - site initiation within following 60 days.

Study will continue for 5 years and total 12 MDR, and/or pre-XDR and/or XDR-TB patients are planned to be enrolled in Georgia.

First potential study subject is planned to be screened/enrolled by the end of 2017.

## **GFATM grants**

GFATM supported grants are being implemented as planned.

*September 30, 2017*

*The report is prepared by Georgia CCM Secretariat*