



Minutes of the 87th CCM meeting

August 7, 2017

Ministry of Labor, Health and Social Affairs of Georgia

**Participants: Participants:**

#	CCM members/alternates	
1	David Sergeenko	CCM Chair Minister of Labor, Health and Social Affairs of Georgia
2	Tamar Gabunia	CCM Vice-Chair URC LLC
3	Amiran Gamkrelidze	NCDC&PH, General Director PR of GFATM grants
4	Tengiz Tsertsvadze	Infectious Diseases, AIDS and Clinical Immunology Research Center  General Director  SR of HIV grant
5	Nino Lomtadze	Alternate member to Mr. Zaza Avaliani, Director of National Center of Tuberculosis and Lung Diseases  SR of TB grant
6	Khatuna Todadze	Center for Mental Health and Prevention of Addiction
7	Merab Gotsiridze	MoIA, Head of Medical Department, alternate member to Mr. David Vardiashvili, MoIA, Deputy Minister
8	Tamaz Marsagishvili	Deputy Minister of Education and Science
9	Irine Javakhadze	Ministry of Finance, Budget department/State and consolidated Budget Formulation Division, Chief Specialist
10	Tamta Demurishvili	Ministry of Corrections  Head of Medical Department
11	Tamar Sirbiladze	USAID, Health and Social Development Office, Director
12	Nino Kochishvili	EU, Alternate member to Mr. Janos Herman, Ambassador, Head of EU Delegation to Georgia

13	Rusudan Klimiashvili	WHO Georgia, Public Health Officer
14	Zurab Vadachkoria	Rector of Tbilisi State Medical University
15	Elguja Meladze	Employers' Association of Georgia, President
16	Lasha Abesadze	NGO New Vector, alternate member to Mr. Konstantine Labartkava – GeNPUD KAP IDU SR of HIV grant
17	Izoleta Bodokia	NGO HIV/AIDS Patients Support Foundation. KAP HIV SR of HIV grant
18	Madlena Khutsishvili	CBO PAPA
19	Maya Kajaya	NGO HRU, alternate member to Ms. Maya Butsashvili - Director of HRU, member of OC
20	Kakha Kvashilava	NGO GHRN, Board Chairman SR of HIV grant
21	Tamar Bortsvadze	NGO MdM, Senior Advocacy Officer Head of OC
22	Nikoloz Mirzashvili	Patients' Union, Former TB Patient, member of OC
23	Gocha Gabodze	"Equality Movement", alternate member to Mr. David Kakhaberi - "Equality Movement" HIV/AIDS Prevention National Program Coordinator. KAP MSM
	Guests/Observers/Invitees	
24	Irakli Katsitadze	LFA, Team Leader
25	Irma Khonelidze	NCDCPH, Deputy Director General, GFATM PIU, Director
26	Tamar Zurashvili	PAS
27	Ketevan Stvilia	NCDCPH, GFATM PIU, HIV program manager
28	Giorgi Kutchukhidze	NCDCPH, GFATM PIU, TB program manager
29	Nana Rukhadze	NGO HIV/AIDS Patients Support Foundation
30	Nona Tordua	NGO HIV/AIDS Patients Support Foundation
31	Murman Kartoziya	CBO PAPA
32	Beso Kazarashvili	CBO PAPA
33	Lorik Garibashvili	Patients' Union
34	David Ananiashvili	NGO Georgia plus Group, director
35	Mariam Kvaratskhelia	Equality Movement
	<b>Secretariat</b>	
36	Irina Grdzeldze	Executive Secretary
37	Natia Khonelidze	Administrative Assistant

### **Agenda**

15:00 – 15:10	<b>Opening speech /remarks/ endorsement of the agenda/ endorsement of the minutes of the 86th CCM meeting</b>
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	Mr. David Sergeenko - CCM Chair, Minister of Labor, Health and Social Affairs of Georgia
15:10 – 15:15	<b>Addressing the members with the request to declare the presence of the Conflict of Interest</b> secretariat
15:15 – 15:20	<b>MSM representation at the CCM/shifting of membership/voting</b> Ms. Irina Grdzeldze – CCM Executive Secretary
15:20- 15:35	<ul style="list-style-type: none"> <li>• <b>Review of the Global Fund Allocation Letter</b></li> <li>• <b>Funding application approach</b></li> </ul> <p>Ms. Irma Khonelidze – NCDCPH Deputy Director, GFATM PIU Project Director</p> <p>Ms. Ketiv Stvilia – NCDCPH, GFATM PIU, HIV/AIDS Program Manager</p> <p>Mr. Giorgi Kutchukhidze - NCDCPH, GFATM PIU, TB Program Manager</p>
15:35 – 15:45	<b>დისკუსია/გადაწყვეტილების მიღება</b> <b>Discussion/making of decision</b>
15:45– 15:55	<b>The role of the PAAC in the process of preparation of funding requests/discussion/ agreement</b> Ms. Tamar Gabunia – CCM Vice-Chair
15:55 – 16:05	<b>HIV and TB grants implementation status</b> Ms. Irma Khonelidze – NCDCPH Deputy Director, GFATM PIU, Project Director
16:05 – 16:15	<b>Report of the Oversight Committee/dashboard recommendations</b> Ms. Tamar Bortsvadze – Chair of the Oversight Committee
16:15 - 16:25	<b>AOB/announcements</b> <ul style="list-style-type: none"> <li>• <b>Mobilization of technical resources</b></li> <li>• <b>Other topics</b></li> </ul>
16:25	<b>Closure of the meeting</b>

**David Sergeenko** - greeted the participants and thanked them for coming. Mr. Sergeenko overviewed an agenda and noted that any other topics beyond the agenda items as always can be brought to the attention of the attendees and discussed with consideration of all members' deep expertise, professionalism and motivation. The Chairperson addressed the members with the request to declare the presence of the Conflict of Interest if any and to fill out the CoI forms.

*The agenda of the 87th CCM meeting was endorsed; the minutes of the 86<sup>th</sup> CCM meeting were approved. The presence of the COI in connection with agenda items was not declared.*

**David Sergeenko** – gave the floor to **Ms. Irina Grdzeldze**.

**Irina Grdzeldze** – stated that due to the change of Mr. Paata Sabelashvili's job position MSM Constituency presented to the CCM the candidacy of Mr. David Kakhaber, Equality Movement, HIV/AIDS Prevention Programs Coordinator (alternate CCM member) to be admitted to the CCM membership instead of Mr. Sabelashvili. Mr. Gocha Gabodze, Equality Movement was nominated as his alternate. This information was announced at the previous CCM meeting. The application material has been circulated among the CCM. Ms. Grdzeldze introduced the selection process which was transparent and documented as per received material. She noted that Mr. Kakhaber is not present at the meeting due his unavailability in the country though Ms. Mariam Kvaratskhelia and Ms. Gocha Gabodze representing Constituency are present at the meeting and the CCM members can address them with the questions if any.

**David Sergeenko** – addressed the attendees with the request to raise additional questions regarding this shift of the membership and the candidate if any. He stated that the absence of the proposed candidate at the meeting makes impossible to present to the members his concept which is an established procedure. Since the CCM was provided with information and material regarding proposed shift well in advance of the meeting the issue can be put to the vote if there is no objectors from the CCM side and the format of the CCM allows doing so.

**Mariam Kvaratskhelia**- expressed the apologies due to the absence of Mr. Kakhaber at the meeting and introduced to the members the professional experience of the candidate and noted on his full legitimacy among the MSM Constituency.

*Mr. David Kakhaber was unanimously admitted to the CCM membership by all members presented at the meeting. The membership of Mr. Paata Sabelashvili was ended.*

**David Sergeenko** – gave the floor to Ms. **Irma Khonelidze**.

**Irma Khonelidze** – briefly reintroduced the Global Fund Allocation letter received in December with special focus on the allocation utilization period. The allocation letter allows country to utilize the allocation amount in the period of 2020-2022 based on the timeline of the current NFM grants.

**Ketevan Stvilia** – continued and presented to the members the prospects of future financing and approaches as per GF Allocation letter (presentation attached). The rapporteur noted that the Allocation Letter was widely distributed among relevant stakeholders by the CCM Secretariat. The special consideration was given to the following:

- Topics of the letters;
- Opportunities to increase return on investment. The Global Fund Strategy Investing to end epidemics and its main components;

- The allocation amount equal to 15,588,062 USD and three programmatic components such as HIV, TB and RSSH (9.3% is recommended); The programmatic components were presented in details;
- Insurance of program quality and efficiency;
- Indicative program split. It was noted that the program split is of an indicative nature and the CCM can propose a revised program split.
- The currency denomination – USD. The timeline of the allocation utilization period. It was noted that any remaining funds from an existing grant, unused by the start of allocation utilization period will not be added to the allocation amount of the next period:
- Co-financing requirements. 25% of the Global Fund allocation is conditional on increases in co-financing contributions targeting disease programs and/or RSSH contributions; It means that in order to receive full allocation amount for the next allocation period the co-financing of the programs in the same period should be increased at least by 25% - by 3,897,016 USD ( by 1.3 mln USD annually); Co-financing should be targeted at: program sustainability and implementation of transitional planning, at least 50% should be invested in interventions targeting key and vulnerable populations; specific timing and activities and principles of verifications should be presented; evidence of confirmed co-financing commitments should be presented to the Global Fund;
- Value for money procurement. Reference prices and the quality of the product;
- Prioritized above allocation request to meet unfunded quality demand and two possible sources: portfolio optimization and external resources.

Finally Ms. Stvilia thanked attendees for the attention and asked Mr. Giorgi Kutchukhidze to present the procedural steps needed to be undertaken.

**Giorgi Kutchukhidze** - presented to the members the procedures for submission to the Global Fund the funding request (presentation attached). The following topics were outlined:

- Rationale (funding request). The funding approaches were discussed in details;
- Program split;
- Steps for submission of Program Continuation Request (the funding approach Georgia is invited): structure of the request; structure and content of the cover letter, self-assessment and annex 1, describing inclusiveness of engagement with key and vulnerable populations;
- Submission deadlines: Window 4 – 7 February, 2018. Window 5 – 30 April, 2018. It was noted that it's up to the CCM to decide which window to use;
- The steps which follow the submission – TRP review and grant negotiations.

**Irma Khonelidze** – summarized the presentation and noted that it's important to agree on launching the process. The role and the functions of the PAAC in preparation of the request would be presented later on at the meeting by Ms. Tamar Gabunia.

**David Sergeenko** – opened the discussion and addressed the audience with the request to share the views on the rationality of investing 9.3% of allocation amount in RSSH and the notions regarding the most optimal way of investing in order to increase the return.

*At the discussion followed the components and nature of the RSSH and its sub-objectives were discussed; It was noted that all components of RSSH should be considered in order to decide on the investment; the following notions regarding possible investment were presented: to increase access to services for vulnerable populations; TB Human Resources, TB micro-elimination component (Autonomous Republic of Ajara); strengthening of HIV services; introducing of innovative methods to increase coverage of beneficiaries with the methadone substitution therapy program e.g MA; some*

*components of the pilot project supported by the Global Fund in Samegrelo Region aimed at reducing spread, mortality and morbidity caused by Hepatitis C, HIV/AIDS and TB were discussed.*

*It was agreed that the considerations/discussions towards investment in RSSH will be continued.*

**David Sergeenko** – gave the floor to **Ms. Tamar Gabunia**.

**Tamar Gabunia** – referred to the issue of the funding approach and stated that if there is no objection from the CCM side the program continuation requests for HIV and TB programs (two separate requests) will be submitted to the Global Fund.

*It was no objection expressed from the CCM side. It was decided to prepare Programs Continuation Requests for HIV and TB grants. The separate applications will be submitted.*

Afterwards Ms. Gabunia referred to the allocation period stating that this period bears a significant importance in terms of the sustainability of the progress achieved and integration into the Health System thus ensuring not only financial but institutional transition from donors' to domestic support. Thus assessment of RSSH needs has a critical importance.

The Vice-Chair one more time reviewed the role and the mandate of PAAC functioning under the CCM. It was stated that the PAAC is a representative body uniting the HIV and TB Constituencies including community organizations. Ms. Gabunia addressed the members with the request to agree on the notion to use PAAC as the platform (WG) for working on Country Funding Requests or to come up with any alternative ideas.

*It was decided that the PAAC will work on elaboration of the funding requests and will lead the Country Funding Request development process as a consultative platform for the CCM.*

The Vice-Chair referred to the format of PAAC operations stating that the work of the group is open and all interested parties including those representing Civil Society have the opportunity to join the group in case of interest. **Albeit, in order to sustain the structure and focus of the group all those having an interest to join the Committee with the status of members are highly encouraged to notify the CCM Secretariat by e-mail. Ms. Gabunia addressed the members with the request to disseminate this information among interested parties to ensure maximum of inclusiveness and transparency of the processes. The PAAC will activate its work on this direction starting from September. Ms. Tamar Zurashvili, PAS will facilitate the work of PAAC.**

Afterwards, Ms. Gabunia raised an issue regarding the responsibilities of the members of the Committee especially those representing the Civil Sector and one more time underlined that those representatives should be the voice of their constituencies bringing the perspective of their respective organizations to the PAAC ensuring bidirectional feedback between their respective constituencies and the PAAC. Ms. Gabunia referred to the process of the development of the TSP. The document was elaborated through transparent process involving broad representation of the CSOs. In response to the comment expressed by the CSOs representative through an e-mail on the absence of informed consent from CBOs on the content of TSP Ms. Gabunia asked participants to suggest the mechanism for improving CSOs participation, asking for the comments/feedback, giving them opportunities to present their essential needs.

**Tamar Gabunia** – gave the floor to **Ms. Irma Khonelidze**.

**Irma Khonelidze** – highly appreciated the agreements reached at the meeting regarding the launch of the working process aimed at elaboration of the Continuation Requests and the role assigned to the PAAC in the process. She noted that the PAAC will be issuing recommendations to the CCM regarding program split and optimal investment in the RSSH and other concrete recommendations. Afterwards she

mentioned that activities under both HIV and TB programs are on-going smoothly without any interruptions.

- TB program. The activities aimed at improved patients' adherence with involvement of CBOs started from the end of June. The work is on-going in close collaboration with the Patients' Union and CBO "New Vector". The development of the model is anticipated by the end of August. The pilot program has been launched in Samegrelo region. The deadline of the tender aimed at procurement of services expires on August 7. The 2<sup>nd</sup> line anti-TB drugs to be procured under state TB program were ordered. HIV ARV-s will be ordered in October. Ms. Khonelidze reminded to the audience that the procurement of 2<sup>nd</sup> line HIV and TB drugs are executed under the State Program starting from the year of 2017.
- HIV Program. The procurement process under PREP was completed. The practical implementation is starting.

Ms. Khonelidze asked the permission to make two announcements and stated that:

- The blueprint on the new TB people-centered model has been developed under the coordination of WHO Europe and was published on the web-site. In this light and within the framework of Regional EECA TB-REP HSS project the NCDC was contacted by WHO Europe Health Strengthening Department with proposal to conduct a working meeting in Tbilisi on September 21-22, 2017. The topics for discussion will be: introduction of a new model and development a guideline and financing of a new model. The needs for TA will be also explored and presented during the working meeting.
- The information regarding IOM regional program on Oversight of Tuberculosis and HIV/AIDS on borders among migrant population was presented. The program is implemented in three countries. NCDCPH is an implementing partner in Georgia. In response to the questions raised by the members and followed discussion on the components of the program Ms. Khonelidze further explained that this is a pilot project which will be assessing the current situation.

**Tamar Gabunia** – gave the floor to **Ms. Tamar Bortsvadze**.

**Tamar Bortsvadze** – presented to the members the report on OC activities and the dashboard recommendations (October – December 2016 (P2) and January – March 2017 (HIV-P3; TB – P1)). *The documents as well as TB MA site visit report were shared with the CCM prior to the meeting.* The OC Chair stated that there are no challenges observed in TB and HIV grants implementation. The programmatic indicators are well achieved. The significant improved coverage of MSM by the HIV/AIDS prevention program has been underlined. It was noted that this development is connected with involvement of "Equality Movement" in the programs targeting MSM population which has ensured service delivery on the basis of resource centers in Tbilisi, Kutaisi, Batumi and Zugdidi. The introduction of saliva test has also contributed in this welcome development. Ms. Bortsvadze noted that some indicators have been excluded from the dashboard e.g OST program indicators based on the fact that starting from July 2017 the OST program was fully handed over to state financing. As for slight underachievement of the indicator related to the number of MDR and XDR TB patients who started the treatment the work in this direction is already on-going and will be followed up in dynamic. Afterwards Ms. Bortsvadze presented to the members the details of the site visit to TB MA ambulatory. The OC Chair outlined the importance of two TB MAs which have been of increased significance given the closure of the Saburtalo TB dispensary. Herewith she noted that both medical personnel and patients expressed some concern with regard the closure of the TB dispensary. One of the patients interviewed stated that the TB MAs can not substitute the services provided by TB especially in terms of management of side-effects. Ms. Bortsvadze underlined the advantages of TB MAs such as the possibility for patients to receive anti-TB drugs near their living area and thus save their time, energy and finances. At the time of site visit both ambulances serve 36 patients, out of whom 24 have sensitive TB and 12 MDR. One of

the observations of the site visit concerns the importance of having access to water and lavatories nearby the MAs. In this case, patients are able to use the facilities of the Republican Hospital, but this is still a far distance away from the MA, which could create some inconvenience for the patients. Another observation was related to the need to strictly observe hygienic norms connected to the proper ventilation of the space. Thus provision of the services can be challenging during winter. According to the nurses, the heating at the rear parts of the vehicles is problematic as well. Thus appropriate measures should be taken before winter.

**Irma Khonelidze** – thanked Ms. Bortsvadze and explicitly noted that the TB MAs are aimed at facilitation of TB Patients needs by providing the possibility for patients to receive anti-TB drugs near their living area and not for substitution of the services provided by TB dispensary. The NCDC has been closely following up this issue in coordination with National Center of Tuberculosis and Lung Diseases. It is planned to reallocate the second TB MA to the areas nearby Tbilisi to accelerate the access to the services for the patients from distinct from Tbilisi areas.

**Tamar Gabunia** – opened the floor for announcement.

**Mariam Kvaratskhelia** – briefly presented the organisation “Equality Movement”, its activities and projects. Afterwards she focused on the regional project “Right to Health” being implemented in 5 countries (Georgia, Armenia, Belarus, Kyrgyzstan, Macedonia) with support of the Global Fund. Grant Recipient: ECOM, sub-contractor in Georgia - Equality Movement. Ms. Kvaratskhelia briefly presented goals and objectives of the project stating that the project is aimed at reviewing of national legal environment in connection with HIV/AIDS and LGBT population, monitoring of violation of human rights, provision of the reports, and advocacy campaigns for proper reflection of the rights of LGBT, MSM and trans\* people in various programs. Within the framework of the project conducting of the study to learn attitude of social workers, physicians and police (confidential interview of 60 policemen) towards LGBT people was planned. While speaking of the objectives of the study the rapporteur stated that ECOM is trying to reveal the reasons of such alarming rate of HIV prevalence (appr 25%) among MSM population. One of the admissions of the rationale behind it was that existing homophobic attitudes among service providers can negatively affect the quality of the services provided. Ms. Kvaratskhelia noted that the organization without any obstacles managed to meet with social workers and physicians and tried to collaborate with the Ministry of Internal Affairs to secure the concordance to interview policemen. In order to secure MoIA’s approval to conduct interviews of policemen, on July 5, 2017 the organization sent an official letter to the Ministry of Internal Affairs with the request to designate a responsible person from MoIA for further communication with the Equality Movement and providing them with all relevant information. For facilitation of the communication with the MoIA the organization has tried to use the CCM as a platform for multi-sectoral dialogue and coordination aimed at effective HIV response. Ms. Kvaratskhelia stated that unfortunately the Organization was not given the possibility to effectively communicate with the MoIA and their request was rejected. Ms Kvaratskhelia referred to the successful precedent of collaboration with MoIA on May 17, 2017 and stated this precedent gives her the basis on speaking of the existing resources for collaboration and she greatly hopes that the Ministry of Internal Affairs will reconsider its decision and the organization as a minimum will be given the possibility to explain to the MoIA the importance of the study. Ms. Kvaratskhelia asked Mr. Gotsiridze, from MoIA to bring the voice of the organization back to the Ministry and facilitate the communication with a person in charge in order to provide him with all relevant details In response to the criticism regarding some unethical expressions of the e-mail letters of Mr. Paata Sabelashvili, in the e-mail communication initiated by him in order to use the CCM as a platform for securing MoIA’s support she stated that Mr. Sabelashvili does not represent the organization “Equality Movement” but represents and advocates for the interests of MSM Constituency at the CCM.

**Merab Gotsiridze** – took this possibility and thanked CCM and MoLHSA for effective work. He noted that there is no a single precedent when MoIA has refused to participate at any discussions. He explained that he himself represents the Medical Department of MoIA and thus he was not in position to address the letter from the Equality Movement and it was readdressed to another unit (department of research and analyses as stated by Ms. Kvaratskhelia). He expressed his readiness as a CCM member to get to the MoIA the voice of the organization as requested by Ms. Kvaratskhelia.

**Izoleta Bodokia** – stated that participation in such study is voluntary and none of the institution can be forced to participate.

**Mariam Kvaratskhelia** – agreed and added that the policemen do not have the right to participate in such interviews unless there is an approval from MoIA.

**Tamar Gabunia** – stated that in general when CCM’s involvement is requested more comprehensive information should be provided. This particular case it could be the synopsis of the study, information on the similar studies conducted in other countries and their impact on addressing the epidemics.

**Marian Kvaratskhelia** – responded that it was planned to conduct the study in 5 countries (Georgia, Armenia, Belarus, Kyrgyzstan and Macedonia). Belarus refused to participate. She noted that if the CCM requested more detailed information it would be provided. Nevertheless they will try to provide the CCM members with more details within next few days.

**David Ananiashvili** – raised an issue regarding take away doses of the methadone within OST program. He presented methadone take away practice in other countries and expressed a notion to start considerations for introducing such method for the patients with good adherence. Afterwards, he referred back to the issue of access to ambulatory services within the state program for HIV individuals raised by him at the previous CCM meeting and stated that the issue was properly addressed and positive steps are being done. He expressed special thanks to Ms. Tamar Gabunia for her great support.

**Amiran Gamkrelidze** – agreed with the notion on good timing for starting this discussion. Dr. Gamkrelidze stated that the issue requires through consideration especially in terms of deliberating mechanisms for issuing the doses for the patients with well adherence and further monitoring. Such mechanisms should be deliberated by the Center of Narcology and Prevention of Drug Addiction. The introduction of the similar practice can be also considered for TB patients.

**Khatuna Todadze** – thanked Mr. Ananiashvili for putting into the agenda such an important topic and Mr. Gamkrelidze for expressing his notion. She confirmed the importance of the issue and stated that the evidence-based medicine and experience of other countries practicing this approach demonstrate that this practice significantly increases all benefits of such component of Harm Reduction as substitution therapy. Such approach can be introduced individually for stabile and reliable patients. Currently the issue of methadone is regulated by the Minister’s Order. The Working Group for issuing recommendations for corresponding amendments in the order can be created.

**Amiran Gamkrelidze**- stated that the mechanism similar to video DOT can be introduced.

**Tamar Gabunia** – stated that the discussions can be continued with the Healthcare Department of MoLHSA. She thanked attendees for having attended and announced the meeting as closed

#### **Decisions:**

- **To shift CCM membership from Mr. Paata Sabelashvili to Mr. David Kakhaber, “Equality Movement”;**
- **To prepare Programs Continuation Requests for HIV and TB grants. The separate applications will be submitted.**

- **The PAAC to work on elaboration of the funding requests and to lead the Country Funding Requests development process as a consultative platform for the CCM;**

**David Sergeenko**

**Natia Khonelidze**

CCM Chair

CCM Administrative Assistant

Annexes:

- 1) Presentation on Georgia Allocation within next allocation period:
- 2) Presentation on Funding Request for Georgia Allocation