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**Minutes of the 57th CCM Meeting  
February 3, 2012**

Meeting venue – Likani Government Residence

**CCM Members:**

**Sandra E. Roelofs** - Chairperson of the CCM;  
**Andrew Urushadze** - Minister of Labor, Health and Social Affairs of Georgia;  
**Irakli Giorgobiani** – First Deputy Minister of Labor, Health and Social Affairs of Georgia;  
**Irine Kurdadze** – Deputy Minister of Science and Education;  
**Vakhtang Akhaladze** - Head of Patriarchate Public Health Department;  
**Nino Kochishvili, on behalf of Mr. Philip Dimitrov**, Ambassador, Head of EU Delegation to Georgia;  
**Koba Khabazi** - Member of the Parliament of Georgia;  
**Zurab Vadachkoria** – Rector of Tbilisi State Medical University (TSMU)  
**David Asatiani** – Ministry of Corrections and Legal Assistance, Head of Healthcare Department;  
**Tengiz Tsertsvadze** - Infectious Diseases, AIDS and Clinical Immunology Center, Board Chairman;  
**Khatuna Todadze** - Research Institute on Addiction, Deputy General Director;  
**Igor Kalandadze** - Director of the National Center for Tuberculosis and Lung Diseases;  
**Akaki Lochoshvili** –GPIC, Executive Director;  
**Lia Tavadze** - UNAIDS Advisor;  
**Tamar Sirbiladze** – USAID, Senior Health Advisor;  
**Nino Tsereteli** – “Tanadgoma” Center for Information and Counseling on Reproductive Health Executive Director;  
**Maia Kavtaradze** - Project Coordinator, GOPA/KfW;  
**Rusudan Klimiashvili** - WHO Country Coordinator;  
**David Ananiashvili** - “Georgian Plus Group”, Director;  
**Iza Bodokia** - HIV/AIDS Support Foundation, Director;  
**Fati Dzotsenidze** - Georgian National Association for Palliative Care, Board Member;

**Guests/Observers:**

**Mikheil Dolidze** - Deputy Minister of Labor, Health and Social Affairs of Georgia;  
**Lela Serebryakova** – MoLHSA, Head of Programs Unit;  
**Tamar Gabunia** – URC, Georgia Tuberculosis Prevention Program, Chief of Party;  
**Signe Rotberga** – UNODC, Country Manager;  
**Maia Meskhi** – Head of working group;  
**Nino Nadashvili** – Member of working group;  
**Natia Khmaladze** – Member of working group;  
**Archil Talakvadze** – Member of working group;  
**Akaki Barkalaia** – Member of working group;  
**Kakha Kepuladze** – Member of working group;  
**Babutsa Pataria** – Ministry of Justice, Deputy Head of International Law Department

**CCM Secretariat:**

**Eka Iashvili** - HIV/AIDS Technical Consultant;  
**Levan Sharashidze** – TB Technical Consultant;  
**Natia Khonelidze** – Administrative Assistant

### Agenda

12:00 – 12:10	<b>Opening speech /remarks</b> Mrs. Sandra E. Roelofs, Chairperson of the CCM
12:10 – 12:20	<b>Welcome speech /remarks</b> Mr. Andrew Urushadze, Minister of Labor, Health and Social Affairs
12:20 – 12:25	<b>Shifting CCM membership for MSCl into membership for URC/voting for</b> Ms. Tamar Gabunia, Chief of Party as a new CCM member
12:25 – 12:35	<b>2012 State TB control and HIV/AIDS programs</b> Mr. Mikheil Dolidze – Deputy Minister of Labor, Health and Social Affairs Ms. Lela Serebryakova – MoLHSA, Head of Programs Unit
12:35 – 12:50	<b>Discussion</b>
12:50 – 13:00	<b>Introduction of draft ToR of CCM</b> Ms. Maia Meskhi – Head of working group Ms. Eka Iashvili – HIV/AIDS Consultant
13:00 – 13:15	<b>Discussion</b>
13:15 – 13:25	<b>Information on Anti-drug Council</b> Ms. Babutsa Pataraia, Ministry of Justice, Deputy Head of Department of Public International Law
13:25 – 13:35	<b>UNODC Action Plan for 2012</b> Ms. Signe Rotberga – UNODC, Country Manager
13:35 – 13:50	<b>Projects Implementation Status</b> Mr. Akaki Lochoshvili - GPIC, Executive Director
13:50 – 14:10	<b>Questions/Answers and Announcements</b>

**Sandra E. Roelofs** – greeted the participants and thanked them for coming. The Chairperson overviewed the conference on the occasion of 10<sup>th</sup> Anniversary of the Global Fund held in Paris on January 31 that turned into a moving homage to the Executive Director, Prof. Michel Kazatchkine. Mrs. Roelofs presented to the audience Georgian translation of the article covering the event and published in the French journal “Le quotidien du medecin” on 1/02/2012. She expressed deep regret concerning the fact that Prof. Kazatchkine is leaving his position of the Executive Director. The role of Prof. Kazatchkine had been highlighted by Mrs. Roelofs at the Paris conference. Then the Chairperson briefly reviewed the current trends and developments observed in the Global Fund including appointment of Mr. Gabriel Jaramillo as the General Manager. Afterwards the Chairperson stated that the vacancy for the position of the General Director of TB Center had been announced. Mrs. Roelofs nominated Ms. Maia Kavtaradze to be presented at the selection committee with the status of authorized representative of the Chairperson. Finally Mrs. Roelofs overviewed the agenda and gave the floor to **Mr. Andrew Urushadze**.

**Andrew Urushadze** – underlined the importance of the updated CCM ToR. The Minister overviewed the current trends observed in the health sector of the country with special focus on hospital development.

**Sandra E. Roelofs** – gave the floor to Ms. Eka Iashvili

Eka Iashvili – put the issue of shifting CCM membership for MSCI into membership for URC and election of Ms. Tamar Gabunia, Chief of Party of Georgia Tuberculosis Prevention Program as a new CCM member to vote.

The decision was made unanimously.

Sandra E. Roelofs – gave the floor to Mr. Mikheil Dolidze

Mikheil Dolidze – stated that on the basis of comprehensive analysis of implementation of 2011 TB and HIV/AIDS State Programs the draft design of 2012 State Programs had been elaborated. After the consultations with a broad range of stakeholders the final consolidated version will be developed and presented at the next CCM session.

Lela Serebryakova - presented the main objectives and components of the draft 2012 State TB Program. While speaking of the components of the program (out-patient treatment; epidemiological surveillance and monitoring; laboratory diagnosis; in-patient treatment) the special attention was given to the following innovations: The **epidemiological surveillance** will be implemented with active involvement of National Center of Disease Control and Public Health (NCDCPH) and its regional structures. The surveillance component envisages functions of the regional coordinators and drugs logistics. The latter has been integrated into the NCDCPH-s logistic system. The **monitoring** of TB program includes a very important novelty such as integration of the functions of Regional Coordinators into the State Program with co-finance from the GF. The rapporteur stated that NCDCPH had been involved in **laboratory services** in Western Georgia within the pilot project and the modern sputum logistic system had been developed. It is planned that laboratory network of NCDCPH as well as the reference laboratory of NCTLD will be actively involved in the implementation of laboratory services. The penitentiary system will be fully integrated in these services. The **out-patient services** include improved access to the diagnosis services for the population; the additional modules such as additional clinical examination for the patients with sensitive TB, treatment of latent tuberculosis, expansion of DOT had been added. The aforementioned component covers anti-TB in-patient services within penitentiary system and annual prophylaxis examination of the medical staff. The **in-patient services** encompass in-patient treatment, diagnostics of complicated cases, surgical operations and palliative treatment. Afterwards the rapporteur presented the budget figures and stated that the actual expenditures in the year of 2011 were equal to 9 239,98 GEL. The budget of the 2012 State TB Program is equal to 9 615, 20.

The discussion followed the presentation.

Mrs. Roelofs raised the following questions: if the capacity building of the staff implementing the laboratory work is envisaged, including sputum collection and sputum smear microscopy; DOT services during out-patient treatment; the mechanisms set for effective management of possible outbreaks; promotion of education and awareness activities in terms of prevention of TB.

Mr. Mikheil Dolidze stated that sputum-smear microscopy will be implemented by the same experienced and qualified staff. The important novelty is establishment of Kutaisi Laboratory that provides culture examination for West Georgia. The supervision of Kutaisi laboratory is performed by NCTLD/NRL which will still be implementing its supervision functions though a Central Public Health Reference Laboratory (CPHRL) will take over by the year of 2013. The Hein test is used for diagnosis; Mr. Dolidze boldly noted that all public health services will be integrated into one model. The investors of the multi-profile hospitals are legally binded to provide the patients with all Public Health care services including those of Tuberculosis. Mr. Dolidze outlined that if needed outbreaks



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will be managed according to Emergency Management Plan. Besides, Private Public Partnership excludes the possibility to dissociate public and private interests. Mr. Dolidze stressed that IC standards are strictly observed in multi-profile hospitals that prevents spread of nosocomial infections. **Ms. Iza Bodokia** stated that recently the signal that the patient's right has been violated has been received from the region. **Mr. Dolidze** underlined the importance of observing the patients' rights and briefed the audience on the effective state mechanisms set for this purpose. **Mr. Andrew Urushadze** provided the audience with outline of legislative base aimed at protection of patients' rights. **Ms. Lela Serebryakova** indicated that presented draft does not envisage TB educational preventive activities though they are incorporated into other state programs. **Ms. Maia Kavtaradze** raised the following questions: management of latent TB among adolescents; functions of the regional coordinators; the risks associated with false positive results while using Hein test system; palliative care within the state program; specificity of integration of TB drug management in NCDCPH logistics system. **Mr. Andrew Urushadze** stressed that integrated model of providing health services strengthens institutional and financial sustainability. **Mr. Dolidze** indicated that taking into account high burden of TB in the country substitution of vertical system with horizontal is not put on the agenda but the integration of the services is planned. Hein test system that had been used only in Tbilisi laboratory has been established in Kutaisi laboratory as well. Regional coordinators represent the mechanism established by the National Program and they will continue to execute their duties in terms of strict control. In response to the question of **Mr. Akaki Lochoshvili** regarding the institution that takes over the responsibility on TB treatment and monitoring **Mr. Dolidze** explained that TB treatment component is implemented by social service agency, surveillance is implemented by NCDCPH. The monitoring of any state program lies within the competences of state regulation agency. The MoLHSA executes coordination and represents the policy-maker. The medical associations are involved in technical development of the guidelines. He highlighted the fact that with the initiative of the First Lady the links with Georgian medical diaspora have been established. The First Georgian - American Conference "Medea 2011" was held in Washington in February 2011. At the time given Georgian-American Medical Public Health Association had been established. **Mr. David Asatiani** remained the attendees on the specificity of the penitentiary system and on high burden of TB in penitentiary establishments.

**Lela Serebryakova** – presented draft version of 2012 State HIV/AIDS Program. At the beginning of presentation she stressed that confirmation test for all screened positive patients will be executed by NCDCPH. The rapporteur presented the following components of the program: testing in high risk-groups; out-patient treatment (planned innovation – monitoring of the patients with hepatitis C who are under the treatment); in-patient treatment (financing will be altered in comparison with 2011). Ms Serebryakova indicated that such risk groups as TB patients, STI patients and prisoners will be tested by NCDCPH. The institution that will take over testing among HIV contacts, "patients with clinical signs and other groups", IDUs will be revealed by the tender. In 2012 confirmation tests will be provided for the following risk-groups: TB patients, STI patients, pregnant women (screening test within the framework of antenatal state program), blood donors (screening within the framework of state safe blood program), commercial sex-workers (screening within the GF program), all screened positive individuals. The test for all afore-mentioned groups will be provided by NCDCPH. The provider of confirmation test among the patients with AIDS clinical signs and HIV/AIDS contacts will be identified by means of the tender. In response to the question of Ms. Eka Iashvili regarding testing among Hepatitis B and C patients Ms. Serebryakova stated that these patients are implied within the category "other groups" as this issue needs further discussion. Afterwards the rapporteur presented the following statistic data related to testing among high risk-groups: 15 858 individuals were tested in 2010, in 2011 the figure amounts to 19 466. In 2012

testing of 22 000 individuals is planned. The budget of 2012 State program has increased and is equal to 3 195,00 GEL.

At the discussion followed **Ms. Nino Tsereteli** raised a question regarding involvement of NGO sector in elaboration of the State program and anonymity of the beneficiaries. **Mr. Dolidze** stated that PTF is presented in the CCM and thus involvement of NGO sector is ensured. In addition NGO sector has a possibility to provide the ideas to the MoLHSA and all their comments and suggestions will be discussed during the working meetings. He explained that the state law on budget strictly defines the reporting and recording procedures that do not exclude the possibility to observe anonymity in special spheres. He addressed the NGO sector with request to elaborate jointly with the experts the criteria for observing anonymity. **Mr. Tengiz Tsertsvadze** stressed that patients with Hepatitis B and C represent the highest risk group and thus should be allocated in a separate target group. He indicated that in 2011 the number of detected HIV patients has been decreased. He highlighted the necessity of aggressive seek and observing anonymity. Prof. Tsertsvadze boldly noted that the country is in the verge to halt and reverse the spread of HIV/AIDS and thus to attain MDG 6 by 2015. He brought to the attention of the audience the weak points of the presented program versus those offered by the AIDS Center. He expressed the hope that the consensus will be reached during the consultative meetings with MoLHSA. **Ms. Khatunda Todadze** stressed the importance of testing of IDUs and the mechanisms of outreach work among this target group. **Ms. Lia Tavadze** provided the audience with information regarding country AIDS Progress Reporting for 2012. She stressed that only IDUs are presented in the list of high-risk groups in the draft program and highlighted the importance of outreach work. **Mr. Dolidze** stated that the number of detected HIV persons has been decreased in the first half of 2011 and the number of detected persons among people with AIDS clinical symptoms has been decreased as well. (the statement was strongly opposed by Mr. Tsertsvadze). He referred to the proposal of Mr. Tsertsvadze regarding voucher system and noted that it will be further discussed in details and all risks will be properly assessed. He provided the audience with brief update on unified code system operational in the country and stated that the principle of coding for specific target groups within the universal system can be agreed. Mr. Dolidze indicated that the possibility of including outreach work into the State Program is being discussed at the moment. **Mr. Andrew Urushadze** stated that the Bill on Protection of Personal Information has been elaborated.

**It was agreed that series of consultative meetings aimed at discussion of the State programs with active involvement of the representatives of AIDS Center and other stakeholders will be held at the Ministry of Health.**

**Andrew Urushadze** – brought attention of the audience to the issue of providing the population of occupied territories with adequate health care services that remains among high priorities of the Government.

**Irakli Porchkhidze** – stressed the importance of the issue raised by Mr. Urushadze and briefly outlined the successful steps undertaken in this direction. He spoke on the activities implemented by MSF and the necessity to smoothly substitute this organization in the region as MSF is planning to phase out.

**Sandra E. Roelofs** – briefed the attendees on the meeting with the Chief of IOM, Ms. Iliana Derilova. The notion to be admitted to the CCM membership has been expressed by Ms. Derilova during the meeting. The Chairperson stated that IOM can seek CCM membership through the PTF. Mrs. Roelofs gave the floor to **Ms. Maia Meskhi** to present draft CCM ToR to the audience.

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**Maia Meskhi** – stressed that the guiding principles of presented draft document were as follows: recommendations of the GF, legislation of Georgia and current CCM ToR. The rapporteur stated that current ToR is endorsed by the Minister's order, while updated ToR will be endorsed by the Prime-Minister. The rapporteur presented the following components of the document: status of the CCM; objectives; main functions; composition; structure; main directions of the CCM work; conflict of interest; accountability; financing; compliance with the GF requirements. The rapporteur presented the following issues that will be formulated according to the suggestions of the CCM members: defining the number of the members; mentioning of the GF in the document; the principle of the renewal of the CCM composition; the endorsement of the renewed composition of the CCM.

Attendees discussed possible ways of more precise wordings of the main components of the document. Such issues as the conflict of interests; the principles of delegating by the government sector its representative to the CCM; principles of selecting members were discussed in details. Ms. Tamar Sirbiladze noted that formulations regarding selection of the Principal Recipients are in conflict with USAID's mandate and should be revisited. This comment was supported by the representative of the EU. It was agreed at the meeting that the GF will be mentioned in the document as it is reflected in the presented draft, the maximum number of the members will be defined as 30, the CCM will continue its work based on the principle of continuity. It was decided that within the next week the CCM members will provide the Secretariat and the working group with their comments and suggestions. The ToR will be further developed taking into account the remarks of the members, the final draft will be shared with the CCM members and presented at the next CCM meeting.

**Sandra E. Roelofs** – thanked the members of the working group and gave the floor to **Ms. Babutsa Pataraia**

**Babutsa Pataraia** – outlined the regulations of the Interagency Coordinating Council for Combating Drug use established by the President's Decree on November 22, 2011. She presented to the audience structure, objectives and authorities of the Council. The main objectives of the Council were specified as follows: elaboration of drug abuse prevention policy based on human rights protection principles; development, periodical revision and monitoring of implementation of a national anti-drug strategy and corresponding action plans; development of proposals and recommendations for elaborating the national anti-drug strategy; coordination of interagency activities in the process of implementation of the national anti-drug strategy for the purpose of promoting implementation of corresponding measures. The rapporteur stated that based on the fact that the fight with drugs lies within the scope of work of the CCM, the ToR of the newly established Council will be revisited and the cooperation of the two institutions will be reflected into the document. It is also planned to develop the Memorandum of Understanding between the two parties. The MoU will define the forms of the cooperation and the role of the CCM will be recognized and acknowledged.

**Sandra E. Roelofs** – gave the floor to **Ms. Signe Rotberga**

**Signe Rotberga** - presented work plan for 2012 of the UNODC Country Office. The following major outcomes have been highlighted: improved drug policy and normative framework; increased container control capacity to counter illicit trafficking; enhanced capacity of Georgian Policy Academy to deliver quality training on core law enforcement subjects; strengthened capacities of law enforcement and FIU officials to cooperate at the national and regional levels in combating money-laundering as well as in seizing and confiscating crime proceeds; more effective



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investigation on criminal cases; more effective mechanisms to combat corruption; increased capacity in the areas of drug and crime prevention; increased awareness on quality drug dependence treatment, the concept of drug dependence as a health disorder and the need for evidence-based drug dependence treatment and care; enhanced UNODC visibility, resource mobilization and participation in UN and other multilateral networks.

**Sandra E. Roelofs** – positively assessed the presented work plan. The Chairperson noted that the work of UNODC should be corresponding with its mandate and thus to be focused on drugs and crime on the contrary with ToR of UNODC where HIV issues are dominating. Mrs. Roelofs proposed to elaborate Memorandum of Understanding with the UNODC that will reflect exactly the real needs of the country.

**Signe Rotberga** – thanked Mrs. Roelofs for her comments and agreed with the proposal on development of MoU.

**Sandra E. Roelofs** – gave the floor to **Mr. Akaki Lochoshvili**

**Akaki Lochoshvili** - updated attendees regarding implementation status of the Global Fund grants and introduced progress update and disbursement requests that will be submitted to the GF through the LFA by 15 February. He also reported that PR is working on close out plan of TB R6 CoS and Malaria R6 Grants, which will be introduced at next CCM meeting for endorsement. Mr. Lochoshvili briefly updated attendees on the requirements of the GF regarding renewal of GEO-H-GPIC grant. He underlined the issue regarding at least 25% cut of the budget. Mr. Lochoshvili asked CCM members to attend the Video Conference on the Periodic Review Process on February 9. Afterwards the rapporteur raised an issue of establishment of Methadone Center in Sukhumi that had been planned and agreed with de facto authorities of Abkhazia. However, after the elections, position of the de facto authorities was changed. Hence an idea to expand already existing Methadone Center in Tbilisi has come. This can be arranged at the Institute of Narcology which gives possibility to nearly double number of beneficiaries with the low cost. He asked attendees to express their opinions or comments.

**Mrs. Roelofs** expressed the opinion on establishment of the methadone Center in Zugdidi. **Ms. Todadze** noted that the demand for such services is not very high in Zugdidi.

Afterwards, Mr. Lochoshvili raised an issue regarding rehabilitation of HIV/AIDS Center and underlined the importance of co-financing from Government side. Finally, he updated the attendees on ratification process of Immunities and Privileges at Georgian Parliament and stated that ratification is ongoing and it is discussed at Parliamentary Committees.

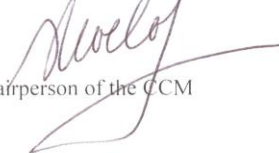
**Sandra E. Roelofs** –thanked the members and observers for having attended and announced the meeting as closed.

#### **Decisions:**

1. **Ms.Tamar Gabunia, URC, Chief of Party of Georgia Tuberculosis Prevention Program** to be admitted to CCM Membership;

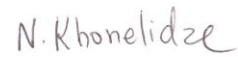
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2. To share electronically suggestions/remarks on draft CCM ToR. The final draft to be presented at the next CCM meeting

Sandra Elisabeth Roelofs



Chairperson of the CCM

Natia Khonelidze



Administrative Assistant to the CCM