

Minutes of the 66th CCM meeting
September 11, 2013
Ministry of Labor, Health and Social Affairs

Sandra Elisabeth Roelofs – Chairperson of the CCM
David Sergeenko – Minister of Labor, Health and Social Affairs, Vice-Chair of the CCM
Dimitri Khundadze – Chairman of the Healthcare and Social Issues Committee
Giorgi Khechinashvili – Member of the Healthcare and Social Issues Committee
Archimandrite Adam – Vakhtang Akhaladze, Patriarchate of Georgia, Head of Public Health Department
Amiran Gamkrelidze – NCD/CPH, Director
Archil Talakvadze – MCLA, Deputy Director
Ketevan Tsikhelashvili - First State Deputy Minister for Reintegration
Nino Kochishvili – Projects Manager, on behalf of Mr.Philip Dimitrov, Head of EU Delegation to Georgia;
Zurab Vadachkoria - Rector, Tbilisi State Medical University
Tengiz Tsertsvadze – General Director, IDACIRC
Khatuna Todadze - Research Institute on Addiction of the Center for Mental Health and Prevention of Addiction, Head
Mamuka Japaridze – TB Center, Director
Lia Tavadze – UNAIDS, Social Mobilization Advisor
Tamar Sirbiladze – USAID, Senior Health Adviser
Rusudan Klimiashvili - WHO, Country Office Coordinator
Tamar Gabunia – TPP, Chief of Party
Elguja Meladze – Employers’ Association of Georgia, President
Iza Bodokia – HIV/AIDS Patients Support Foundation, Director
David Ananiashvili – “Georgia Plus Group”, Director
Lasha Tvaliashvili - Executive Director, Real people – real Vision, (PTF)
Lasha Zaalishvili - Executive Director, Georgian Harm Reduction Network (PTF)
Konstantine Labartkava - New Vector, Board Chairman (PTF)
Tamta Golubiani – Former TB Patient

Guests/Observers

Mariam Jashi – Deputy Minister of Labor, Health and Social Affairs
Peter Welch – Expert, GFA, Fiscal Agent of GFATM
Vasil Janjgava - Expert, GFA, Fiscal Agent of GFATM
Tea Jibuti - Programmatic Health Professional, LFA

Paata Sabelashvili - Programmes Manager, Georgian HRN, representative of the organization LGBT Georgia
 Giorgi Kuchukhidze – NCD/CPH, Surveillance Division, Specialist
 Maia Butsashvili - Director, HRU
 Nata Avaliani - Public Health Expert, HRU
 Ketil Stvilia – Specialist of Health Administration and Public Health, PFID
 Maia Meparidze - Manager, PFID
 Nino Esakia – Deputy Director, NCTLD

Secretariat:

Eka Iashvili – TB Consultant/Executive Secretary
 Maia Tsereteli – HIV/AIDS Consultant
 Natia Khonelidze – Administrative Assistant

Agenda

<i>Session I</i>	
12:00 – 12:10	Opening speech /remarks Mrs. Sandra E. Roelofs , Chairperson of the CCM
12:10 - 12:20	Welcome speech /remarks Mr. David Sergeenko , Minister of Labor, Health and Social Affairs of Georgia
12:20 - 13:00	Representation of the PTF in the CCM Mrs. Sandra E. Roelofs , Chairperson of the CCM
13:00 - 13:10	Introduction/Election of New Members Mr. Dimitri Khundadze – Parliament of Georgia, Chairman of the Healthcare and Social Issues Committee Mr. Giorgi Khechinashvili - Parliament of Georgia, Member of the Healthcare and Social Issues Committee Ms. Tamar (Tamta) Golubiani - Save the Children in Georgia&Azerbaijan, Director of Program Development and Quality Mr. Lasha Tvaliashvili – Real People – Real Vision , Executive Director (PTF) Mr. Lasha Zaalishvili – Georgian Harm Reduction Network, Executive Director (PTF)

	Mr. Konstantine Labartkava – New Vector, Board Chairman (PTF)
13:10 – 13:25	Brief overview of the EHRN International Harm Reduction Conference(June 9-14, 2013 Vilnius, Lithuania and of the EHRN Regional Consultation “Developing a Global Fund regional HIV project in EECA together” held within the framework of Conference)/New Funding Opportunity on HIV/AIDS – initiation of a dialogue on the potential role of Georgia in the process of the Regional Initiative implementation in 2014-2016 Mr. Archil Talakvadze – Deputy Minister of Corrections and Legal Assistance Ms. Maia Tsereteli – HIV/AIDS Consultant to the CCM
13:25– 13:40	Access to HIV/AIDS treatment/Public Defender’s recommendation Ms. Maia Tsereteli – HIV/AIDS Consultant to the CCM
13:40 – 14:00	Current status of TB services in the country Ms. Mariam Jashi – Deputy Minister of Labor, Health and Social Affairs
14:00– 14:20	Brief Announcements
<i>Session 2</i>	
14:40 – 15:15	Review of the applications for the position of PR/introduction by the PR candidates 1. Partners for International Development (8 min) 2. Health Research Union (8 min) 3. National Center for Tuberculosis and Lung Diseases (8 min) 4. National Center for Disease Control and Public Health (8 min)
15:15 – 16:15	Questions and answers/discussion
16:15 – 17:20	Voting/Announcing of the results

Session 1

Sandra E. Roelofs – greeted the participants and thanked them for coming. The Chairperson apologized for the last-minute postponing of the meeting scheduled for August 29. Mrs. Roelofs overviewed the work undertaken by the Principal Recipient Nomination Committee that had been already communicated to the members and expressed the hope that PR elections will be

held in full compliance with all requirements of the GFATM. The evaluation criteria were agreed with the PR Nomination Committee members and they are not under questions (evaluation forms attached) an e-mail from Prof. Tsertsvadze and the members' comment triggered the necessity for additional discussion that would be done at the meeting later. Afterwards, Mrs. Roelofs briefly overviewed the meeting of Georgian-American Medical and Public Health Association (GAMPHA) and MEDEA 2013 (Tbilisi, June 2013) and Global Fund's 29th Board Meeting (Sri-Lanka, June 18-19) which was mainly focused on the New Funding Model. The Chairperson announced that the issue of Indicative and Incentive Funding split was thoroughly discussed and the position of Georgia agreed with all CCM members. Country's consolidated opinion on preference to stick to the Indicative Funding was communicated to the Board member from EECA Constituency. The Chairperson gave the floor to **Dr. Sergeenko**.

David Sergeenko – underlined the importance of the issues to be solved especially the election of new PR(s). Due to the affiliation with the nominated PR (NCDCPH) and taking into consideration the recommendation of the GFATM the MoLHSA will not participate in the voting procedure. Dr. Sergeenko in his capacity of Minister of Health and as Vice-Chair of the CCM welcomed the presence of candidates from both government and non-government sector as an important factor ensuring transparency of the process. The Minister expressed confidence that the decision of the voting CCM members will be based on a thorough analysis, will be free of any bias and will serve in the best interests of the country. He explicitly noted that he both as the Minister and as CCM Vice-Chair does not give a preference to one or any other elected candidate and the only priority is an effective implementation of the GFATM programs. The Minister stressed that albeit the MoLHSA is not participating in making the decision the monitoring and control will be much stricter in comparison with the previous years since the outcomes of the programs is the ultimate responsibility of MoLHSA.

Sandra E. Roelofs – thanked the Minister and focused on the issues of the structure/composition of the CCM. With the purpose to be in better compliance with the GFATM policy on civil society representation and rotational basis of the membership the following issues were presented to the attention of the members for discussion and making a consolidated decision. Changes in political landscape of the country made logic replacement of Mr. Gigi Tsereteli with another representatives of the Healthcare and Social Issues Committee: Mr. Dimitri Khundadze and Mr. Giorgi Khechinashvili; replacement of Mr. Koba Khabazi with Ms. Tamta Golubiani, former TB patient, quota of the members representing PTF, suspension of the membership of HAPSF.

At the discussion followed Ms. Bodokia strongly opposed exclusion of HAPSF from the membership at the current stage explaining that the organization is not presented in the CCM under PTF umbrella and thus it did not run for the position of the PTF's representative within

CCM during the recent internal elections held within PTF. The representatives of the PTF strongly advocated the idea of granting the PTF with a fourth seat versus offered to them three seats pointing out that several letters were sent to the CCM with the request of LGBT inclusion. The representative of the LGBT offered to admit to the CCM membership LGBT community at the current meeting without any PTF quota and not under the PTF umbrella. The issue of admission of Ms. Tamta Golubiani was in general agreed by the members. It was pointed out that her representation as former TB patient but not as a representative of "Save the Children" should be explicitly reflected in all documentation. After a thorough and lengthy discussion it was agreed with the members that HAPSF would retain its separate membership status (not under the PTF quota) until the next PTF elections for CCM representation and three seats will be granted to the PTF. *** The following persons: Mr. David Khundadze, Mr. Giorgi Khechinasvili, Ms. Tamta Golubiani, Mr. Lasha Tvaliashvili; Mr. Lasha Zaalishvili; Mr. Konstantine Labartkava were confirmed by the CCM as CCM members **.**

Sandra E. Roelofs – addressed Mr. Peter Welch with the request to present the issues related to the programs implementation (due to the absence of the GPIC at the meeting) and the progress on the food voucher program issue.

Peter Welch – stated that FA team is not in a position to update the members on the programmatic part of grants implementation. Mr. Welch noted that the programs' implementation is continuing on an ongoing basis, the managers are actively involved in implementation and the budget was approved. The FA has submitted to the GFATM the proposal on cash incentive scheme for the food voucher program. FA team is waiting feedback from the GFATM.

Sandra E. Roelofs – underlined the urgency of food voucher program, stressed that the patients had not received any incentives since January 2013 and gave the floor to **Mr. Talakvadze**.

** On September 12, 2013 by initiative of the CCM Chairperson a meeting with PTF leadership and LGBT representative was held. It was agreed that under PTF, LGBT will address CCM for a fourth PTF mandate within CCM to increase CSO involvement and representation of affected communities.*

*** Later on, the confirmation of Tamta Golubiani was revoked as documented legitimacy of her person representing the TB patient community was not presented.*

Archil Talakvadze – briefly overviewed EHRN International Harm Reduction Conference held in Vilnius and two important reforms of the country presented to the forum - planned changes in drug legislation (anticipated to be finalized by the end of autumn) and introduction of the National program on prevention, treatment and diagnosis of Hepatitis C in penitentiary system (anticipated to be launched during the current year). The rapporteur stated that as aftermath of the negotiations with two global producers of the Hepatitis C drugs significant decrease of price to be expected. The tender on procurement of the drugs will be announced next week. The government of Georgia has expressed its goodwill the tender price to be applied to 10,000 patients in the civilian sector. Mr. Talakvadze announced that Dr. Michel Kazatchkine, UN Special Envoy for HIV/AIDS in EECA, Mr. Kwaśniewski, Former President of Poland and Mrs. Dreifuss, Former President of Switzerland expressed their enthusiastic support to these important reforms.

Sandra E. Roelofs – gave the floor to **Ms. Tsereteli**.

Maia Tsereteli – overviewed EHRN Regional Consultation held within the framework of the EHRN International Harm Reduction Conference and Regional Funding Request Concept Note prepared in response to an invitation from the Global Fund Grant Management Division to the EHRN to participate as an “early applicant” under the New Funding Model (presentation attached).

After a discussion CCM members welcomed the proposed regional initiative for Eastern Europe and Central Asia, especially initiation of a dialogue on the potential role of Georgia in the process of the Regional Initiative implementation in 2014-2016 and CCM endorsed the regional funding request by the Eurasian Harm Reduction Network (the letter of endorsement signed by the CCM Chairperson attached). Afterwards Ms. Tsereteli presented to the audience the Ombudsman’s recommendation to the MoLHSA to take appropriate measures for ensuring universal access to HIV/AIDS State Program for all persons notwithstanding of their citizenship status and presented to the audience a case described in the Ombudsman’s letter.

At the discussion followed Mr. Tengiz Tsertsvadze stated that currently only two persons without ID cards referred to the AIDS Center. Such individuals can receive treatment under the GFATM programs but they do not have access to the diagnostic services envisaged by the State Program due to legislative restrictions. He noted that despite the problem does not have a massive character the mechanism for ensuring access to services should be found which is extremely important in terms of patients travelling from Abkhazia. Dr. Sergeenko responded that allocation of the state funds for this purpose in great extent depends on the prognosis of the AIDS Center; the regulation of the previous government resulted in an uncontrolled situation when non-residents of Abkhazia tried to illegally receive HIV/AIDS services. Ms.

Tsikhelashvili referred to a high priority of this issue and proposed to broadly discuss it at the next CCM meeting. Dr. Sergeenko referred to the Government's regulation # 331 that responds to the issue under discussion. Ms. Todadze focused on some difficulties for the residents of Abkhazia and foreign citizens in utilizing the State OST Program and presented the patients' initiative aimed at creation of a separate payment package for them. Dr. Sergeenko noted that effectiveness of methadone substitution program can be calculated as being less than 50% and urged upon a more integrated approach.

It was agreed that the issue requires further comprehensive consideration.

Sandra E. Roelofs – gave the floor to **Ms. Jashi**.

Mariam Jashi - overviewed the current status of TB services in the country and presented to the CCM concrete issues for issuing recommendations and making decisions (presentation attached).

After a discussion of the acute issues related to the functioning of TB services in Rustavi the most optimal options were defined as follows: **negotiations on allocation of TB services in the premises of Rustavi Central Hospital; granting to the Hospital a grace period due to ongoing renovation in terms of compliance with the license conditions.** While discussing the status of TB hospital in Kutaisi the issue of extending the **deadline for execution of the conditions envisaged by contract of sale for one year period was put to the vote and accepted unanimously by the members.** At the discussion prior to voting Mr. Japaridze strongly supported the extension of the deadline. Mr. Gamkrelidze supported this option and expressed an idea of appropriateness to preserve the Kutaisi TB Hospital under the state control and further negotiations aimed at alteration of the condition of the contract. Mr. Khechinashvili underlined the need of strengthening of TB control and acuteness of the problems accumulated in the field. He referred to the hearing of the Parliamentary Committee on Healthcare and Social Issues on February 21, 2013 where important decisions were made and announced that by the end of the year at the hearing of the Committee the outcomes of the decisions made and the result of the work undertaken will be heard. He expressed an idea of consolidated approach towards solving the problems in TB control versus fragmentary approach such as discussion of separate issues at the CCM meetings. He stressed the three main issues of Kutaisi TB Hospital: excessive HR, weak management and inadequate hospital beds' fund and brought to the attention of the attendees the acute problems faced by Abastumani TB Hospital.

Ms. Jashi continued presentation and presented the issue of Tbilisi #2 TB Hospital. The following options were presented to the audience: a working meeting with Tbilisi City Hall to discuss the possibilities for allocation of alternative premises in coordination with Property

Management Agency and the option of integration into PHC with capitation; Ms. Jashi described the situation with regard to operationalization of MDR clinic in TB Center and suggested one month trial launch of the clinic for making precise calculation of associated costs. Mr. Japaridze strongly opposed this offer referring to financial instability encumbered from the debt to the creditors. In response to the questions of Mr. Khechinashvili he stated that separation of MDR patients is absolutely necessary, as for Children's TB department the negotiations with Tbilisi City Hall on allocation of additional space is ongoing. Ms. Jashi offered to put moratorium on the issue of MDR clinic to further study the situation. The Deputy Minister updated the audience on the current status of the construction of National Reference Laboratory (NRL) and announced that the agreement of Georgian side to allot 28,000 Euro to cover a financial gap has been communicated to KfW. The issues related to identification of the contractor will be further decided upon reaching an agreement with KfW.

Sandra E. Roelofs – announced that in her capacity of the WHO Goodwill Ambassador she will attend WHO 63rd Regional Committee in Turkey and briefly presented the topics of this important event.

Mariam Jashi – declared that MoLHSA is going to participate to present at the Regional Committee the topic of Universal Healthcare.

Lia Tavadze – announced that from September 27 UNAIDS is phasing out from the country. She thanked the members and personally Mrs. Roelofs for support and wished to the CCM further success.

Sandra E. Roelofs - suggested that since UNAIDS seat in the CCM will be vacant an issue of admission of UNODC or IOM can become a matter of further consideration. Afterwards the CCM Chairperson raised the issue of evaluation of the short-listed candidates and the method of identifying the winner-organization for discussion/consideration and making a final decision. Two alternative options were presented to the audience: 1) filling out of the evaluation forms through a point system 2) filling out of the evaluation forms that will help the CCM members to rank the candidates based on the scoring system and identify their recommended candidates for each slot as #1, #2 etc. The election Committee will summarize the rankings and not the total sum of the points given to the candidates.

At the discussion followed Mr. Khechinashvili, Mr. Zaalishvili, Mr. Talakvadze strongly opposed the second option and expressed an opinion to stick to the first version as previously agreed by the Members of the Nomination Committee. Mr. Tsertsvadze, Ms. Todadze, Ms. Sirbiladze, Ms. Gabunia expressed an opinion toward preference of the second option based on the minimization of possible bias.

Both procedural options were put to vote. All CCM members participated. The second option was made effective by the vast majority of CCM members.

Mr. Khechinashvili suggested to use the consultancy services of Grant Management Solutions (that was raised by him earlier in an e-mail communication) as soon as possible to settle all acute issues of the PR and CCM. Mr. Zaalishvili strongly seconded this notion and added that GMS will be assisting SRs, SSRs and PR(s).

The Chairperson once again gave a detailed description of the voting procedure: the applicants will present their presentations (8 minutes per applicant), the voting members will fill out evaluation forms, place them into the envelopes and put them on the middle of the table, the voting members will then leave the conference room and the Election Committee will count the votes. The composition of the Election Committee was defined as follows: Mrs. Roelofs - CCM Chairperson, Tea Jibuty - LFA (as an observer), Mr. Peter Welch and Mr. Vasil Janjgava - FA team, Ms. Klimiashvili - WHO Country Office Coordinator, Mr. Dimitri Khundadze - Chairman of the Healthcare and Social Issues Committee of the Parliament of Georgia, Mr. Giorgi Khechinashvili - MP, member of the Healthcare and Social Issues Committee of the Parliament of Georgia, Mr. Tvaliashvili - PTF, Executive Director, Real People Real Vision, Mr. Archil Talakvadze - Deputy Minister of Corrections and Legal Assistance. Mr. Zaalishvili offered to fix with the signatures the receipt of evaluation forms/bulletins (with indication of the number of bulletins received). This proposal was accepted by the members and the signatures were fixed (attached). It was one more time agreed with the members that based on the precedent of the January elections and in order to observe the confidentiality the voting bulletins will not be signed by the members. The Chairperson announced that by her initiative the procedure of summarizing the votes will be video recorded (the video record will be submitted upon request). Mrs. Roelofs announced five minute break.

Session 2

Sandra E. Roelofs – gave the floor to the applicants.

Katie Stvilia – presented to the audience the organizational structure, material-technical resources of the organization and proposed PR team. Ms. Stvilia briefly reviewed the organization's experience of implementing international grants (including funded by GFATM), past and current portfolio of the organization. Ms. Stvilia focused on financial management of the organization (financial operations managed by ORIS, MIS is currently under development, financial manager with long experience, annual external audits and past experience of audits procured by GPIC for GFATM program). Ms. Stvilia overviewed the organization's experience in the field of procurement and stated that 2 specialists will be hired additionally. Supply chain management was developed within the GFATM program. The organization has a three year

experience of distribution of test-systems and supplies to SSRs. PfID plans to shift to electronic system of supply management and to hire a specialist to be in charge of supply chain management. Ms. Stvilia outlined the measures aimed at strengthening of accountability and control system. Internal systems – assessment of SR and technical assistance, development of MIS, employment of M&E specialist, development of a tool for M&A,. External accountability – to the GAFTM and CCM, development of quarterly and six-month reports, sharing with PTF quarterly reports and preparing for them monthly digests. Special emphasize was given to risk management including programmatic, financial and in supply. Ms. Stvilia underlined the importance of broad involvement of civil society and the importance of interaction with the PTF. Finally Ms. Stvilia emphasized the importance of the support of their partner-organization, Emory University in terms of utilizing its intellectual resources for technical support of effective management of HIV/AIDS, TB and virus hepatitis both in prevention and treatment directions (presentation attached).

Nata Avaliani – presented to the audience a brief history of the organization and priority directions. Afterwards she focused on the issue of Human Resources and noted that the organization is staffed with highly intellectual individuals holding broadly recognized degrees. Organization's portfolio and achievements in the fields of TB and HIV/AIDS programs management in the local and international arena, Project Management team, HIV/AIDS Prevention Project Structure and TB Project Structure were presented to the audience. Some of the implemented projects were emphasized. Donors and partner-organizations were listed. Afterwards the rapporteur outlined the Management standards and technologies developed within HRU. The legal status and organogram were described. Ms. Avaliani noted that Organization's Operational Manual was developed. The rapporteur outlined the management of the organization. She noted that effective financial management, experience in local and international procurement, electronic system of supply management, experience in management of SRs, adequate material and technical resources, electronic system of project management are in place and operational. Ms. Avaliani described the Financial Management system of the organization. She mentioned long experience and established system of budgeting, established practice of monitoring of actual expenditures and budgeted funds, proper accounting system, effective mechanisms of internal control and external audit. Afterwards the rapporteur focused on risk management capacities and minimization of other risks and listed proper management operational system and programmatic activities aimed at minimization of the risks. Afterwards Ms. Avaliani presented to the audience the proposed plan on coordination and involvement of civil society for both components applied for. Ms. Avaliani focused on proposed sustainability strategies highlighting the following interventions: alignment with national strategies and implementation plans; close coordination with state programs and support to interventions within GFATM programs; development and testing/adaptation of new effective implementation mechanisms; effective utilization of public

health network and other existing government services; increased civil society participation; strengthened partnership with private sector; existence of effective financial management, M&E, reporting and quality control systems. The rapporteur brought to the attention of the attendees proposed plan on development of reporting and additional mechanisms of control focusing on strengthening of internal control and re-checking of data; renewed accountability systems; strengthening of MIS, strongly defined and formalized reporting system to CCM, government and non-government structures; operational research on evaluation of programs' efficiency and effectiveness; improved programmatic reporting within the framework of internationally recognized M&E system. Finally, Ms. Avaliani presented to the audience organizations' experience in the sphere of logistics. While describing the procurement procedures adopted at the organization it was stated that GFATM's policy on procurement of health and non-health products will be applied, subject to full compliance with Georgian legislation (presentation attached).

Mamuka Japaridze – presented to the audience the legal status of TB center stating that it represents a Stock Company with 100% share belonging to the state. The governing bodies of the TB Center are stakeholders' assembly and Executive Director. Dr. Japaridze outlined the organizational structure of the Center. He focused on the capacity, status and right to enter into a grant agreement with the GFATM and the ability to receive and issue grants in accordance with the legislation in place and stated that in case TB Center is elected as PR appropriate procedures aimed at alteration of the status or allocation of additional funds for tax payment envisaged by legislation will be imminent. He presented to the audience the organization's experience in implementing grants funded by the GFATM and other donors stressing that TB Center represents a SR of the GFATM TB grant for the past eight years. He described the coordinating-governing unit of NTP (comprised of central, regional and district levels). Dr. Japaridze outlined the procurement mechanism that is functioning in accordance with Georgian legislation and requirements of the GFATM. He presented to the audience a project implementation team and structure of an independent sub-unit that will be established for the purpose of GFATM program implementation. The rapporteur outlined material and technical resources, infrastructure, system of accounting and supply management mechanisms, financial management to record all transactions, disbursements and balances; internal control system, auditing arrangements established within the organization.

Amiran Gamkrelidze – presented to the audience the legal status, structure, mission and priority directions of the NCDCPH. He specified the reasons for electing the NCDCPH as follows: the organization is the main implementer of Public Health Programs in the Country; the organization is responsible for communicable and non-communicable diseases surveillance; GFATM and State Financial resources will be placed under one umbrella; 15-year experience in managing international projects and grants; transparency (Unified Electronic System of State

Procurement), solid experience in large volume procurement, State Treasury Electronic Service System in place for transactions (exceeding 1 Million GEL), experienced staff; a variety of ongoing projects, collaboration with internationally recognized organizations; a laboratory and public health network throughout the country; effective management (elimination of malaria, integration of the R. Lugar Public Health Research Center with NCDC and its full operationalization in a short period of time); strong human resources (presentation attached).

Sandra E. Roelofs – thanked the applicants and opened the floor for questions/answers and discussion.

A thorough discussion was mainly structured around the following issues: involvement of SRs in the Supervisory Board or consideration towards establishment of a new governing council for administering of the GFATM grants; increased civil society participation; reduction of stigma and discrimination; management of possible crisis situation; M&E system; procurement and supply management; adherence to treatment among TB patients; sustainability strategy.

Before voting the following CCM members declared having a Conflict of Interest and signed for not participating in the voting.

For HIV/AIDS grant:

1. David Sergeenko (as a Chairman of the SB to NCDC)
2. Tengiz Tsertsvadze (as SR)
3. Khatuna Todadze (as SR)
4. Mamuka Japaridze (as PR applicant)
5. Lasha Zaalishvili (as SR)
6. Konstantine Labartkava (as SSR)
7. Amiran Gamkrelidze (as PR applicant)
8. Iza Bodokia (as SR)

For TB grant:

1. David Sergeenko (as a Chairman of the SB to NCDC)
2. Mamuka Japaridze (as PR applicant)
3. Amiran Gamkrelidze (as PR applicant)

Thus 16 participating members were present during voting for each components of HIV/AIDS grant. 32 bulletins (16 for HIV prevention and 16 for HIV treatment) were completed and handed to the Election Committee. 21 CCM members participated in the voting for election of the PR of TB grant. 21 bulletins were completed and handed to the Election Committee. After the completion of the bulletins the voting members left the room and the members of the

Election Committee counted the votes. Mobile phones were switched off and put in a special bag. The process of voting was video recorded. Mr. Elguja Meladze apologized that due to a scheduled flight he had to leave the meeting before start of the voting. He filled out the bulletins and handed them in an envelope to the CCM Secretariat (the process was video-recorded).

After completion of the counting the members were invited back to the conference room and CCM Chairperson announced the results of the counting.

The distribution of votes was as follows:

For HIV/AIDS prevention component (out of 16 bulletins):

NCDCPH – 11 votes;

HRU- 4 votes;

PfID – 1 vote

For HIV/AIDS treatment component (out of 16 bulletins):

NCDCPH – 15 votes

PfID – 1 vote

For TB grant (out of 21 bulletins):

NCDCPH – 16 votes;

HRU – 3 votes;

PfID – 1 vote;

TB Center – 1 vote

The National Center for Disease Control and Public Health was elected by the CCM as the PR for prevention and treatment components of GFATM HIV/AIDS grant and for Tuberculosis grant.

Sandra E. Roelofs - addressed the members with the request to declare any claims and/or objections towards the democracy/fairness of the elections held.

No objections/remarks followed from CCM members (both voting and non-voting).

Presented CCM members fixed approval of the results of the election with the signatures at a specially elaborated CCM approval form (attached)

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

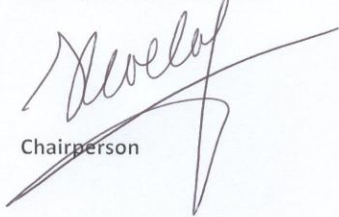
Decisions:

1. To admit to the CCM membership:
 - Mr. Dimitri Khundadze** – Parliament of Georgia, Chairman of the Healthcare and Social Issues Committee
 - Mr. Giorgi Khechinashvili** - Parliament of Georgia, Member of the Healthcare and Social Issues Committee
 - Ms. Tamar Golubiani** - Former TB Patient; *
 - Mr. Lasha Tvaliashvili** – Real People – Real Vision, Executive Director (PTF)
 - Mr. Lasha Zaalishvili** – Georgian Harm Reduction Network, Executive Director (PTF)
 - Mr. Konstantine Labartkava** – New Vector, Board Chairman (PTF);
2. To endorse the Regional Funding Request by the Eurasian Harm Reduction Network;
3. To conduct negotiations on allocation of TB services in the premises of Rustavi Central Hospital and on granting to the Hospital of a grace period due to ongoing renovation in terms of compliance with the license conditions;
4. To conduct negotiations on extension of the deadline for execution of the conditions envisaged by contract of sale of Kutaisi TB Hospital;

*Was revoked the next days (with explanatory note, see attached)

5. To elect NCDCPH as the Principal Recipient for GFATM GEO-H-GPIC and GEO-T-GPIC grants.

Sandra Elisabeth Roelofs



Chairperson

Natia Khonelidze

N. Khonelidze

Administrative Assistant