



UNITE^{TO} FIGHT

COVID-19 RESPONSE MECHANISM

C19RM Monthly Update to the Board

Report for June 2022

Publication Date: 19 July 2022

Geneva, Switzerland

Executive Summary for June Report

1

Development of C19RM Reporting: C19RM reporting continues to evolve. Monthly reports provide updates on awards, progress in absorption/ funds utilization and procurement pipeline. Quarterly reports provide a more detailed analysis as data becomes available. For previous Board reports, please visit [this page](#).

2

Update on COVID-19 Epidemiological Situation: High Impact Asia portfolios have the highest number of confirmed cases. Southeast Asia confirms the trend with an increase in new registered cases. The progression of new COVID-19 cases in the last month shows that cases are on the rise, which might be driven by COVID-19 surges in the Northern Hemisphere.

3

C19RM 2021 Awards: As of 30 June 2022, C19RM has awarded or recommended for Board approval US\$3,458 million to 124 countries, which represents the 26.9% of the 2020-2022 allocation with the following breakdown: 76% to reinforce national COVID-19 responses, 13% for urgent improvement to health and community systems, and 12% for HIV, TB and malaria mitigation.

4

Finance Update: C19RM 2020 utilization is at 62% (US\$553 million) for Core and High Impact portfolios, and on target to reach 63%-70% with expenditures currently under validation in grant closures and expenditure reports. 97% of C19RM 2021 awards are integrated into grants, 72% of the cumulative budget has been committed, and disbursements increased to 55% of cumulative budget until 30 June 2022. In-country absorption (March-22 Pulse data) remains low at 26% due to lower-than-expected demand. An action plan for reinvesting C19RM funds and portfolio optimization (US\$800 million) is in place to improve C19RM funds impact and absorption.

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Health Products Update: Health Products represent 67% of C19RM 2021 awards. Out of a total of US\$3,443 million awarded by 30 June:

- **Diagnostics** represent 23% of awarded C19RM 2021 funds (US\$799 million) and is showing weak demand in some countries due to perceptions about status of the pandemic. The GF keeps supporting technical capacity-building through [Project STELLAR](#), with 4 countries with implementation in progress.
- **Oxygen** represents 16.5% of C19RM 2021 funds (US\$566 million). US\$190 million has been invested in non-oxygen therapeutics.
- **IPC/ PPE** represents 18% of awarded C19RM 2021 funds, with US\$35 million dedicated to IPC program strengthening, which includes several low-cost, high-impact investments.

6

Reinvesting C19RM Funds: As a result of the significant evolution of the pandemic context and of national responses since 2021, countries need to urgently adapt their C19RM financing and investments focus to maximize impact and optimize results. Using partners support, countries are encouraged to leverage the opportunities of C19RM reinvestment planning and C19RM portfolio optimization, country experience, and the guidance coming from the Global Fund and other partners. The operationalization of reinvesting C19RM funds is ongoing and on-track: a workplan has been developed to ensure a coordinated approach to managing and tracking C19RM reinvestments for the top 20 countries (with largest C19RM investments) and C19RM portfolio optimization; guidance on strategic priorities to optimize C19RM investment will be shared soon with countries.

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Country Case Studies: Within High Impact Africa 2, [Uganda](#) provided a remarkable example of a country that effectively reinforced the response to COVID-19, with COVID-19 diagnostics procured by the Global Fund utilized continuously since the beginning of the pandemic and contributing significantly to the successful national response.



Development of C19RM Reporting



Development of C19RM Monthly Reporting

[Last month's report](#) covered key selected data points updates from financial and programmatic performance, COVID-19 program disruption, award and pipeline updates, key messages across C19RM control and containment, reinvesting C19RM funds, risk assurance, monitoring and oversight (M&O), and country case studies. These sections will continue to be updated on subsequent reports and provide additional analysis on emerging themes. Greater details on these core sections will be included as relevant data becomes available.

Last Report

The last report provided updates on key data points, country case studies and pivotal thematic updates - hybrid approach:

- Update on the COVID-19 Epidemiological Situation
- C19RM 2021 Awards
- Finance Update
- Updates on Health Products Pipeline
 - Overview
 - Diagnostics
 - Oxygen
 - Therapeutics
 - ICP/PPE
- Reinvesting C19RM Funds
- Risk Assurance: M&O
- Case studies on country-implementation

This Report

This report provides updates on key data points:

- Update on the COVID-19 Epidemiological Situation
- C19RM 2021 Awards - Summary
- Finance Update
- Updates on Health Products Pipeline
 - Overview
 - Diagnostics
 - Oxygen
 - ICP/PPE
- Reinvesting C19RM Funds
- Case studies on country-implementation

Subsequent Reports...

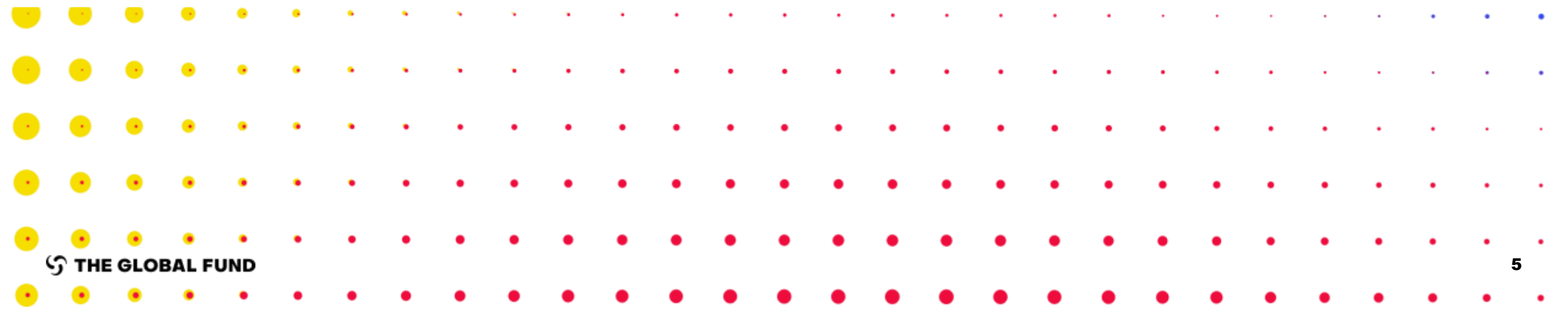
Future reports will cover topics as relevant data become available:

Based on C19RM Monthly Board Report differentiated approach, a more **detailed quarterly report** will be provided, including analysis on relevant thematic areas and latest available data:

- **Quarterly Reports:** focusing on programmatic data/results, findings and insights from Spot Checks and Pulse Checks, lessons learned, strategic actions taken to address challenges and bottlenecks and key issues and messages from operationalization of C19RM.
- **Monthly Reports (key data),** including updates on awards, progress in absorption/ funds utilization and procurement pipeline.



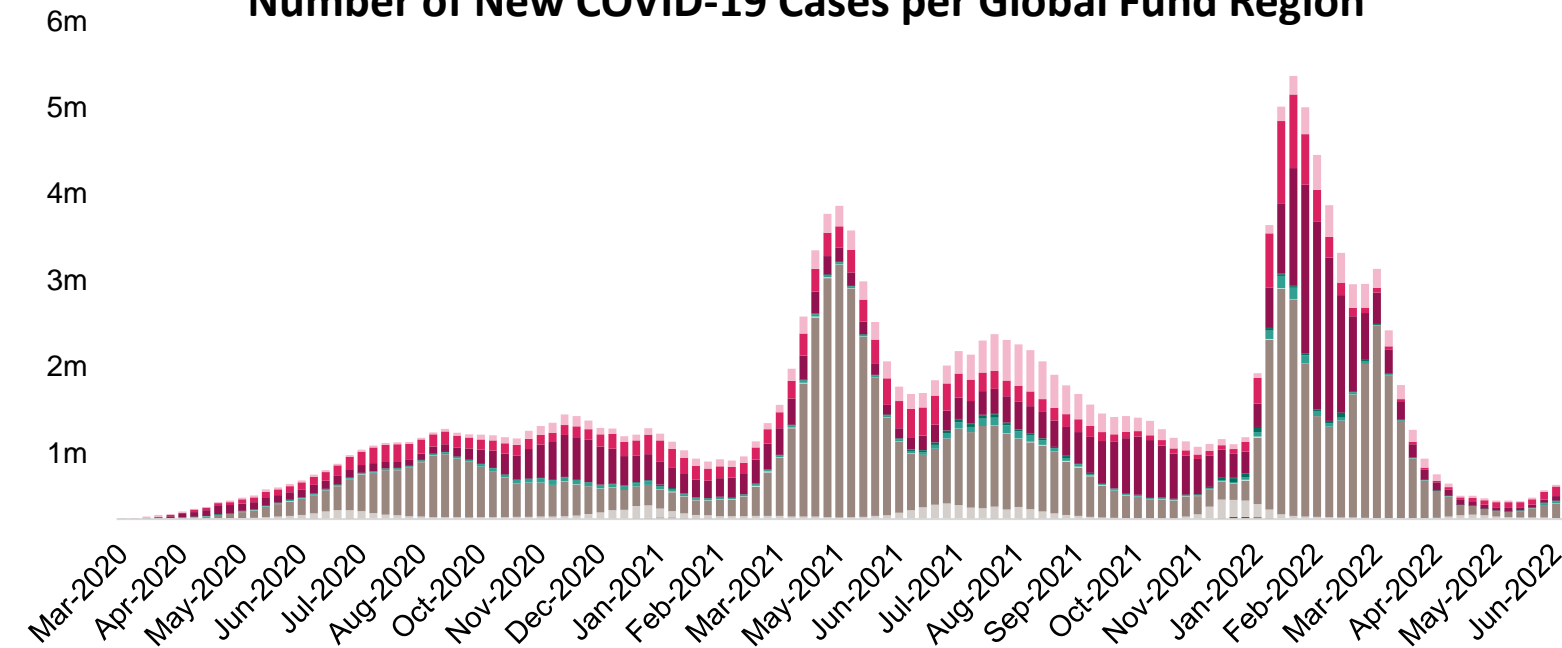
2 Update on COVID-19 Epidemiological Situation



COVID-19 Burden in Regions the Global Fund Supports

High Impact Asia remains the region with the highest confirmed cases followed by Southeast Asia. Whereas disruptions have considerably hindered progress in programs for the three diseases, program adaptations keep showing signs of recovery and resilience.

Number of New COVID-19 Cases per Global Fund Region



Region	New cases since last Board report
AELAC-SEA	28,999
AELAC-LAC	306,748
AELAC-EECA	141,298
AME-WA	1,105
AME-SEA	28,999
AME-MENA	55,749
AME-CA	5,846
HIAAsia	465,319
HIA-2	75,685
HIA-1	9,743

True infections far outnumber confirmed cases in many countries. See <https://ourworldindata.org/covid-models>

***High Impact Africa 2:** South Africa, Ethiopia, Kenya, Zambia, Mozambique, Zimbabwe, Uganda, Zanzibar
****MENA:** Morocco, Tunisia, Egypt, Algeria, Mauritania, Sudan.

SUMMARY

- According to WHO, as of 1 July 2022, there have been 545.23 million confirmed cases of COVID-19, including 6.33 million deaths reported to WHO worldwide. Confirmed cases in the Global Fund portfolio are 152.22 million, while deaths are 2.17 million. **High Impact Asia has a total of 72.8 million confirmed cases, with 0.47 million new cases in the last month.** New cases have also been recorded in **Southeast Asia leading to a total of 33.3 million with an increase of 1.2% in the last month.**
- Confirmed cases in Latin America and Caribbean remain at over 17 million while those in ***High Impact Africa 2** continue to rise to over 5.8 million while the ****MENA** region is at over 3 million. Overall new COVID-19 progression in the last month shows that cases are on the rise, which might be driven by COVID-19 surges in the Northern hemisphere. **Eight Global Fund implementing countries are also among the top 25 countries in the world with the highest cumulative cases.** These include India, Russian Federation, Vietnam, Iran, Colombia, Indonesia, Ukraine, Malaysia.



C19RM 2021: Awards



C19RM 2021 Awards: Highlights

C19RM 2021 Fast-track Requests Awarded

- The Global Fund has awarded **US\$735 million to 49 applicants via Fast-track**. Applicants to Fast-track have requested an average of **7.3% of their 2020-2022 allocation**.
- **Notification Letters** with confirmation of awards are sent to applicants in an average of **9.8 business days**.

C19RM 2021 Full Funding Requests Awarded

- **US\$2,723 million awarded to 124 applicants**, including funding recommended for Board approval, for a portfolio average of **21.2% of 2020-2022 allocations** (excluding previously approved Fast-track applications).
- An **Unfunded Demand** of **US\$1,066 million** in demand pipeline registered from **75 applicants**.

C19RM 2021 Total Requests Awarded

- A total of **US\$3,458 million awarded to 124 countries**, which represents **26.9% of 2020-2022 allocations**.

C19RM 2021 Awards by Priority Area, WHO Pillar and ACT Accelerator Pillar

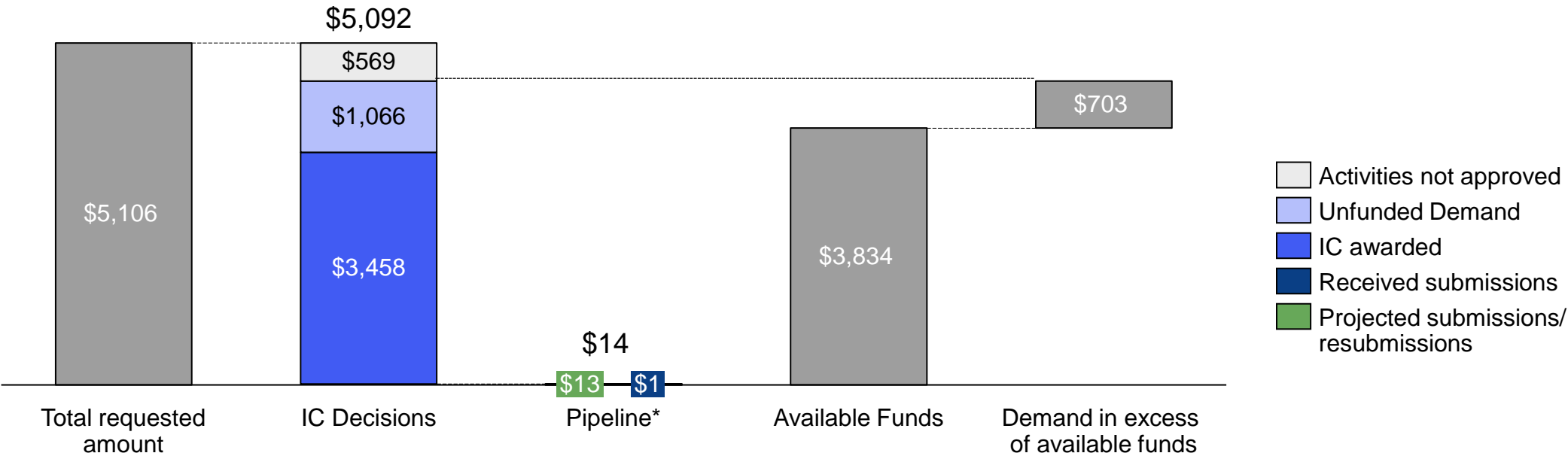
- **C19RM Board Priority Areas:** US\$3,458 million has been awarded or recommended for Board approval with the following breakdown: **76% to reinforce national COVID-19 responses**, **13% for urgent improvements to health and community systems**, and **12% for HIV, TB and malaria mitigation**.
- **WHO Pillars:** C19RM awards are primarily directed towards **Pillar 5: National laboratories (26%)**, **Pillar 6: Infection prevention and control (22%)** and **Pillar 7: Case management (25%)**. The remaining investments are mostly awarded into **Pillar 9: Maintaining essential health services and systems (12%)**.
- **ACT-A Pillars:** **84% of the US\$3,458 million C19RM awards** is directed towards **ACT-A Gap Filling Activities**.

C19RM 2021 Status of Awards and Pipeline



- Funding awarded or recommended for Board approval: US\$3,458 million (90%) of C19RM 2021 to 124 applicants.
- Unfunded Demand of US\$1,066 million registered from 75 applicants.
- Demand pipeline: US\$13.2 million projected and US\$0.6 million in screening.
- Available funds at US\$3,834 million, including two new pledges by the European Commission (US\$165 million) and New Zealand (US\$5 million).
- 21 Additional Fast-track funding requests awarded in 2022 for a total of US\$210 million.

C19RM 2021 Awarded & Requested Amounts



All values are in US\$ million and rounded. Incomplete submissions are also recorded. The full submitted amount is considered.

*Pipeline includes: submissions under review, in screening and projected submissions.



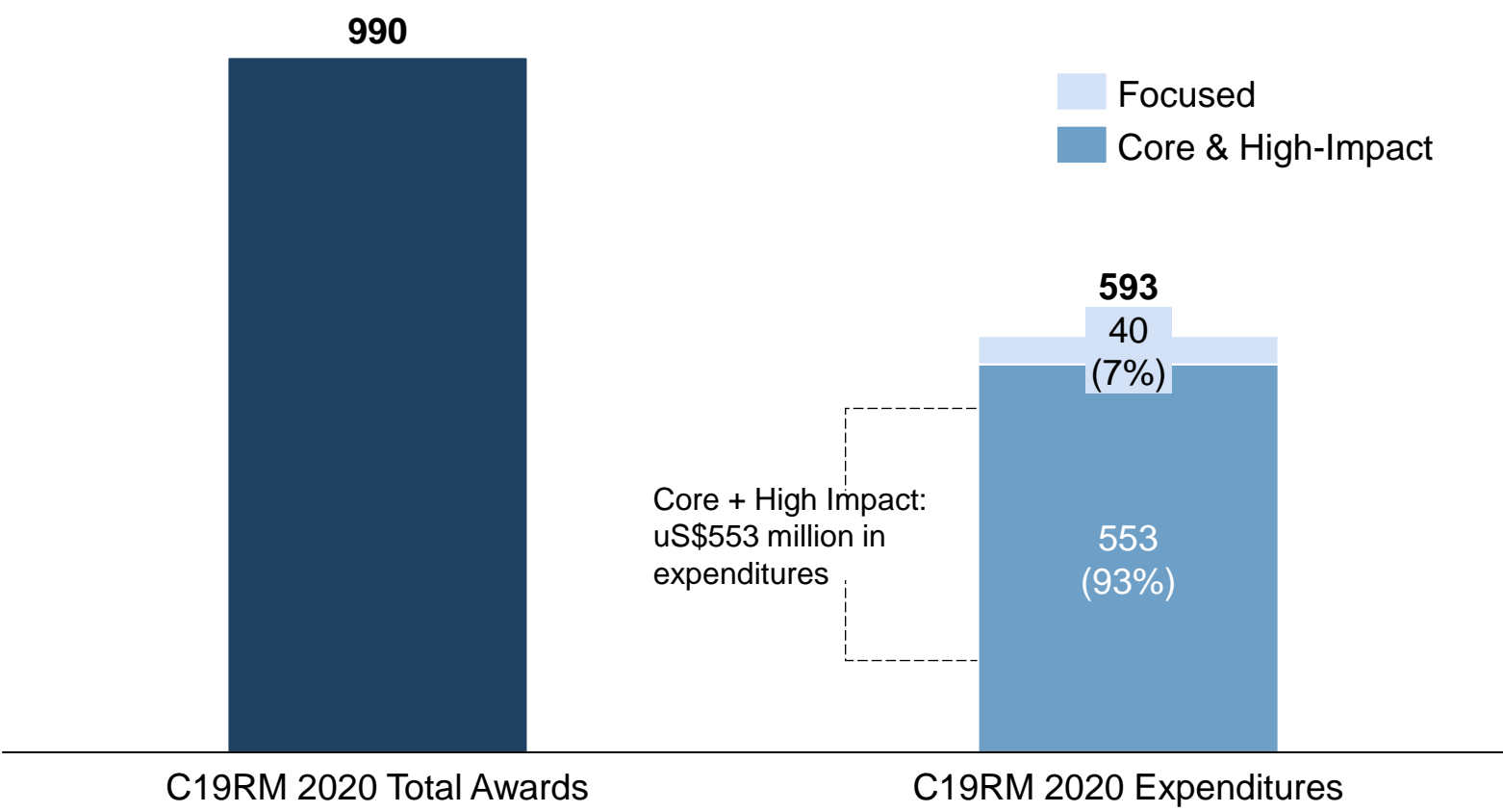
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Finance Update



C19RM 2020: Current in-country utilization of 62% for Core and High Impact based on validated expenditures – on track to reach the expected target of 63%-70%.

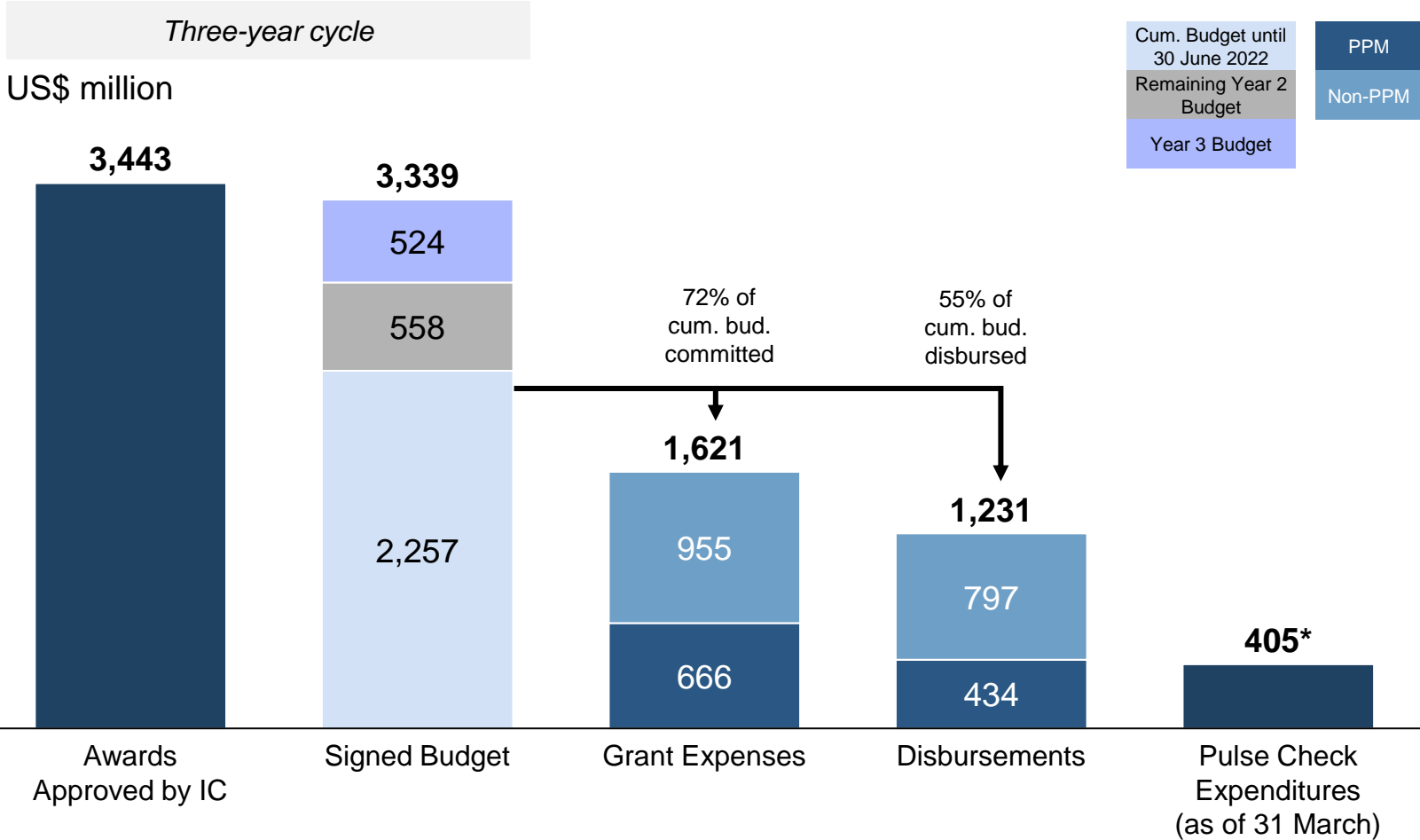
As of 30 June 2022
US\$ million



- **C19RM 2020 in-country utilization is 62% for Core and High Impact** (with a denominator of US\$895 million) and on target to reach the expected utilization range of **63%-70%** with expenditures currently under validation in the grant closures & forthcoming expenditure reports.
- Unused C19RM 2020 funds are transferred to C19RM 2021 with a use by date of 31 December 2023.
- The in-country utilization including the Focused portfolio is 60%.

C19RM 2021: Strong performance on the upstream awards (97%), but downstream is slower than expected (55% disbursed & 26% spent*) and urgent targeted reinvesting/optimization of funds is underway to get back on track.

As of 30 June 2022



- 97% of awards (US\$ 3,339 million) are integrated into grants.
- 72% of the cumulative budget until 30 June 2022 has been committed, including orders placed in wambo.org, the Global Fund’s online procurement platform.
- Total cumulative disbursements of US\$1,231 million on 30 June 2022, representing 76% of commitments, and 55% of the cumulative budget until 30 June 2022.
- In-country absorption based on the March 2022 Pulse Check data remains low at 26% due to lower-than-expected demand.
- The Secretariat has developed an action plan to prioritize **reinvestment** and **portfolio optimization** of **US\$800 million** to improve impact and absorption of C19RM and get back on track.
- Focus for the **next 18-months** remains to **mitigate the impact of the pandemic on HIV, TB and malaria** and the **overall health system** by accelerating targeted investment in **key priority areas**.



Health Products Update



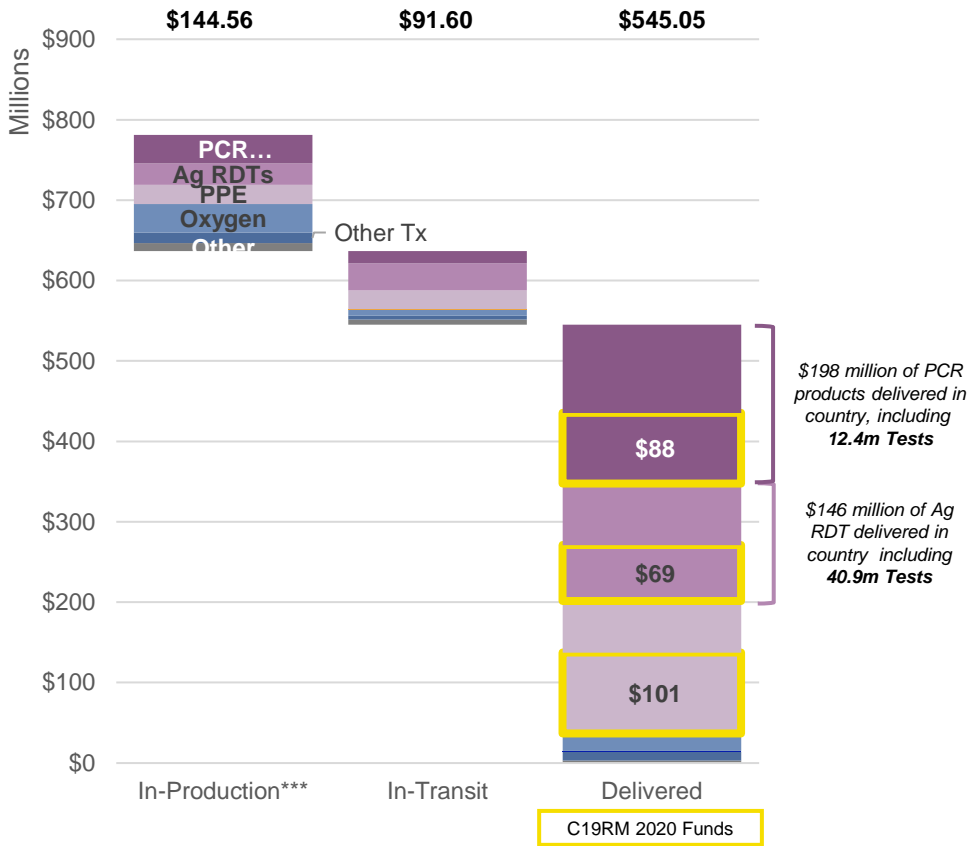
Countries are supported to reinvest C19RM funds to accelerate delivery and improve impact in the evolving context of the pandemic.

	Country Demand	Supply/Logistics
Overall	<ul style="list-style-type: none">• Very low incremental demand in converting awards into Purchase Orders (PO) - (49% of PPM in PO or process of approval).• Slower progress (and less visibility) on non-PPM awards; some volumes being rechanneled to PPM (e.g., PSA).• Opportunities for reinvesting for shifts in demand reflecting the perceptions of status of COVID-19 pandemic.	<ul style="list-style-type: none">• Limited manufacturing supply constraints.• Logistics challenges including scarce sea/air freight capacity and impact of changing COVID-19 controls measures, particularly in China impacting malaria and PPE – but also intermittent and recurring port congestion in some countries that may results in vessels being diverted to neighboring countries or waiting for substantive time to be offloaded.
Diagnostics	<ul style="list-style-type: none">• Demand weak (and weakening) in some countries.• Increasing focus on ‘bi-directional’ testing approaches.• Supporting development of ‘test & treat’ approaches in anticipation of oral antivirals.• Coordinated TA support through Project Stellar/ACT-A-Diagnostics.	<ul style="list-style-type: none">• After some months, some recent country demand uptake of the much lower priced Antigen RDTs approved by Stringent Regulatory Authorities:<ul style="list-style-type: none">◦ Lowest prices per test (average between US\$1-2).◦ Self-tests available at US\$1-5 per test with lead time of 1 to 4 weeks.◦ Shelf-life extensions to 24 months.
Infection Prevention and Control	<ul style="list-style-type: none">• Demand weakening as COVID-19 control measures relaxed.	<ul style="list-style-type: none">• High product availability despite manufacturing capacity reductions.
Case Management/ Therapeutics	<p><u>Oxygen:</u></p> <ul style="list-style-type: none">• Complex technical specifications of PSA plants results in lengthy award to orders to delivery.• Project BOXER providing technical assistance to 35 countries (increasing by 1 country since May), supported by and aligned with ACT-A & O2 Working Group. <p><u>Therapeutics:</u></p> <ul style="list-style-type: none">• WHO allocation proposal for nirmatrelvir-ritonavir shared with countries who have opted in. Five countries have accepted the original allocated volumes.• Increasing country interest received for nirmatrelvir-ritonavir through PRS.	<p><u>Oxygen</u></p> <ul style="list-style-type: none">• Manufacturing timelines, infrastructure requirements and global freight challenges drive long lead-times for PSA plant orders. <p><u>Therapeutics</u></p> <ul style="list-style-type: none">• Negotiation with key supplier on COVID-19 therapeutics is ongoing

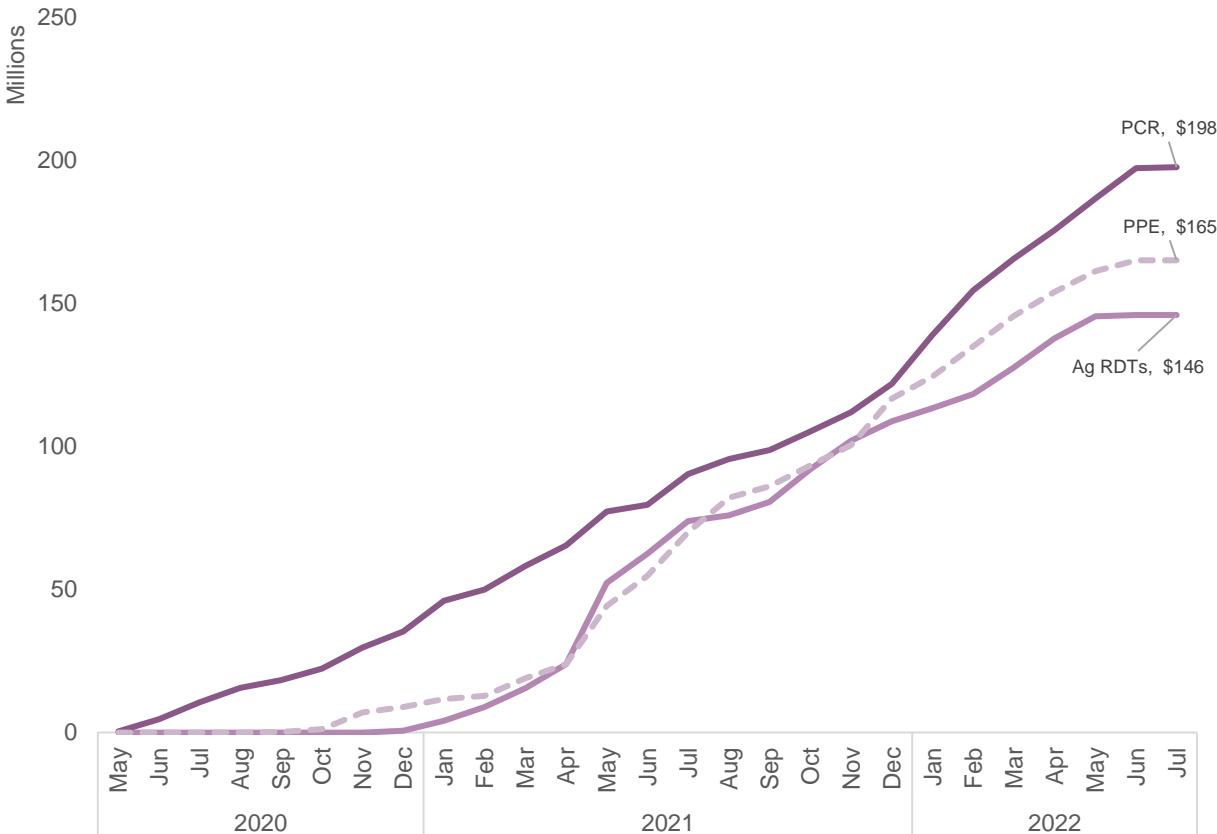
Orders for US\$781 million* (May US\$760 million) of COVID-19-related health products have been placed through the PPM/wambo.org since 2020, with US\$545 million delivered (May US\$520 million)

- US\$2.8 billion has been awarded since 2020 for the procurement of COVID-19 health products, including through C19RM 2021. **Dx**: US\$799 million (April US\$782 million); **PPE**: US\$491 million (no change since April); **O2**: US\$566 million (April US\$ 543 million).
- US\$259 million products delivered through PPM with C19RM 2020 funds.
- US\$286 million (May US\$261 million) products delivered through PPM with C19RM 2021 funds; US\$236 million (May US\$240 million) products are being delivered.

Cumulative PPM Procurement Pipeline (\$US)**



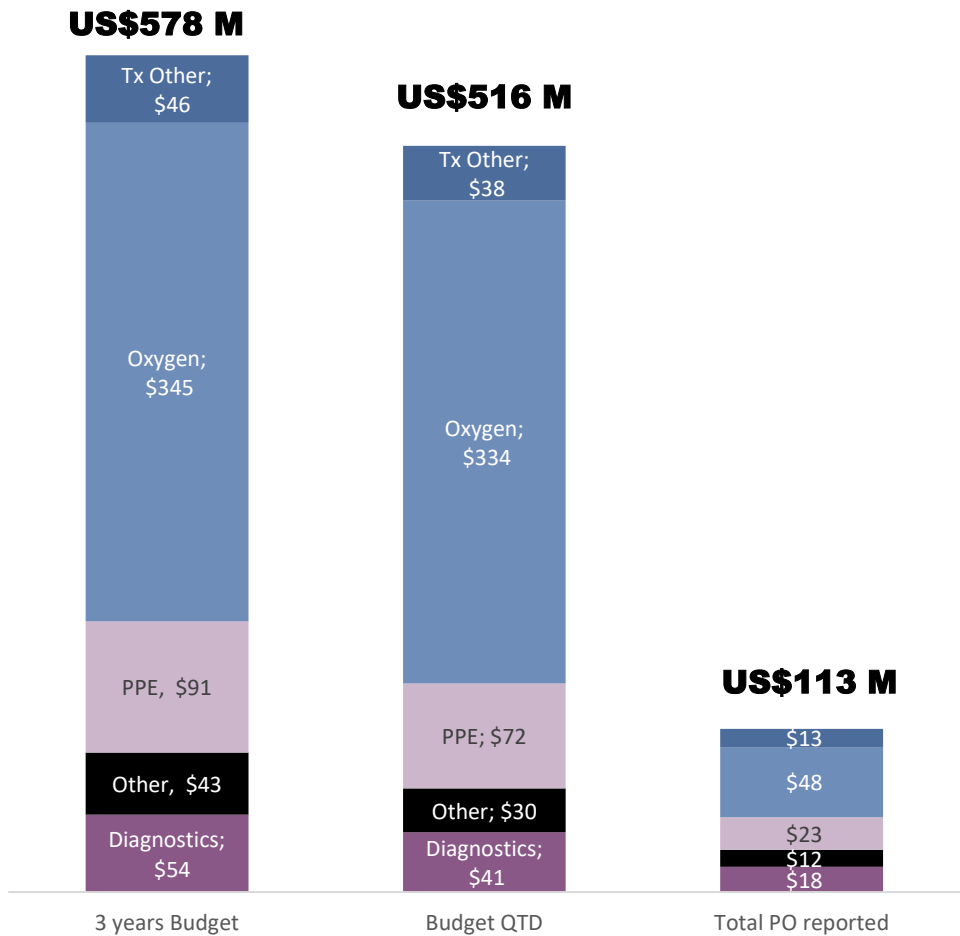
Cumulative PPM Deliveries by Month (\$US)****



* Reporting on aggregate value of orders and split by category is being refined over time to reflect any savings achieved on completed orders and to exclude procurement of non-health products
** Based on Procurement Service Agent data as of 4 July 2022
*** Production includes process through to importation clearance and pick-up for transfer to flight/vessel
**** Dollar value of deliveries by month may change slightly over time due to potential reporting lags as well as revisions over time

Non-PPM Procurement Reporting¹: June 2022

Top 45 countries only (in US\$ million) (Budget includes HPMT version C/D if uploaded)



¹ Non-PPM reporting excludes any investments or subsequent purchase orders related to 'non-reportable items'; this includes disinfectants, scrubs, and repurposed/existing medicines; accounts for an additional US\$99 million of current budgets

² Budgets as per aggregated C19RM 2021 HPMTs available and uploaded into the aggregate too at 13 Jun 2022 reported PO Amount as per PR Procurement Progress Reporting templates submitted against 10 June deadline for procurement through end of May and beg of June

³ COVID-19 Tx includes any procurement related to novel COVID-19 medicines as well as other supportive hospital equipment (e.g., x-ray, patient monitor, blood gas analyzer, etc.)

⁴ UN agencies are UNDP + UNOPS+ UNICEF grants

At grant level

By Region	Expected report	Report received	% Reporting
HIA1	7	7	100%
HIA2	7	7	100%
HIA	20	19	95%
AME	23	17	74%
AELAC	5	5	100%
TOTAL	62	55	89%

By region	Non-PPM Budget QTD	3 years Non-PPM Budget ²	Reported PO Amount ²	Budget conversion rate QTD	3 years budget conversion rate
HIA1	40	43	27	67%	63%
HIA2	176	181	23	13%	13%
HIA	166	182	23	14%	12%
AME	119	146	33	28%	23%
AELAC	15	26	7	47%	27%
Grand Total	516	578	113	22%	20%

By product category	Non-PPM Budget QTD	3 years Non-PPM Budget ²	Reported PO Amount ²	Budget conversion rate QTD	3 years budget conversion rate
Diagnostics	41	54	18	43%	33%
PPE	72	91	23	31%	25%
Oxygen	334	345	48	15%	14%
Tx Other ³	38	46	13	34%	27%
Other	30	43	12	38%	27%
Total	516	578	113	22%	20%

By type of PR	Non-PPM Budget QTD	3 years Non-PPM Budget ²	Reported PO Amount ²	Budget conversion rate QTD	3 years budget conversion rate
National	456	499	86	19%	17%
UN Agencies ⁴	60	79	27	45%	34%
Total	516	578	113	22%	20%

Non-PPM Procurement Reporting: June 2022

Top 45 countries only (in US\$M)

Summary Points

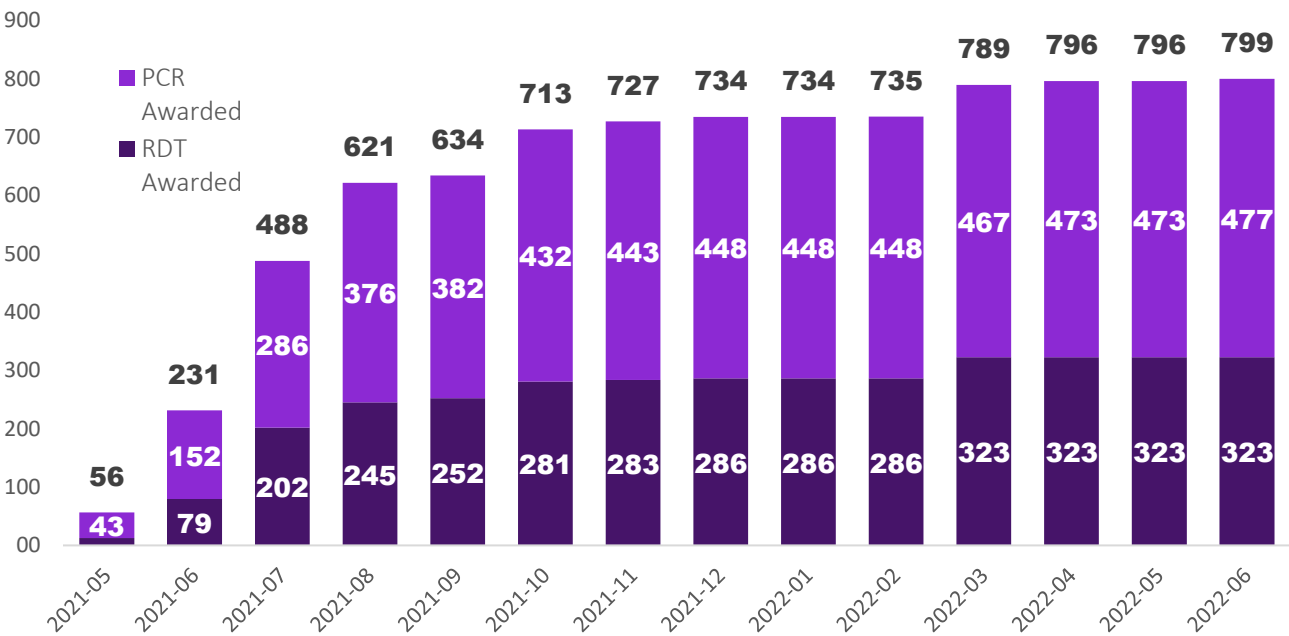
- Conversion of **Non-PPM budget** to purchase orders is at 20% of three-year total (compared to 13% from previous report) with significant procurements in the pipeline such as US\$37 million in Pakistan for PSA plants and Nigeria for about US\$21 million for PPE and oxygen.
- The total of purchase orders reported in June 2022 for US\$113 million is an increase of US\$21 million from the last reporting in May.
- **Oxygen** represents 60% total non-PPM budget; with PSA plants alone accounting for 47% of this total budget. Globally, oxygen procurement and implementation has been slow – given the technical and complex nature of the procurement as well as in country coordination, site assessments and infrastructure needs.
- Ongoing efforts to re-channel funds where procurement has not progressed – either from wambo.org/PPM to non-PPM channels (i.e., US\$8 million (particularly as it relates to PSA plants, e.g., US\$1 million for Cambodia, US\$1 million for X-ray equipment for Ukraine) or non-PPM to wambo.org/PPM for Liberia).
- Ongoing exercise to align C19RM investments with the changing pandemic context, national priorities and lessons learnt.

Diagnostics

Current awards include:

- Awards for diagnostics amount to US\$799 million representing 23.2% of the C19RM 2021 total funds awarded.
- These include US\$323 million for Ag-RDTs and US\$477 million on PCR tests.
- In the context of C19RM 2021, this is estimated to translate into a total number of tests between 165 and 200 million, depending on the final procured mix of PCR tests and Ag-RDTs.

Cumulative Diagnostics Awards in C19RM 2021 (\$US million)



CMLI Project STELLAR – June 2022

Supports technical capacity-building. June’s Implementation status:

- 23 planned countries.
- 21 countries with completed stakeholder engagement.
- 19 countries completed initial submission of Deep Dives analysis.
- 10 countries with workplan completed and implementation in progress.
- 4 countries with implementation in progress.

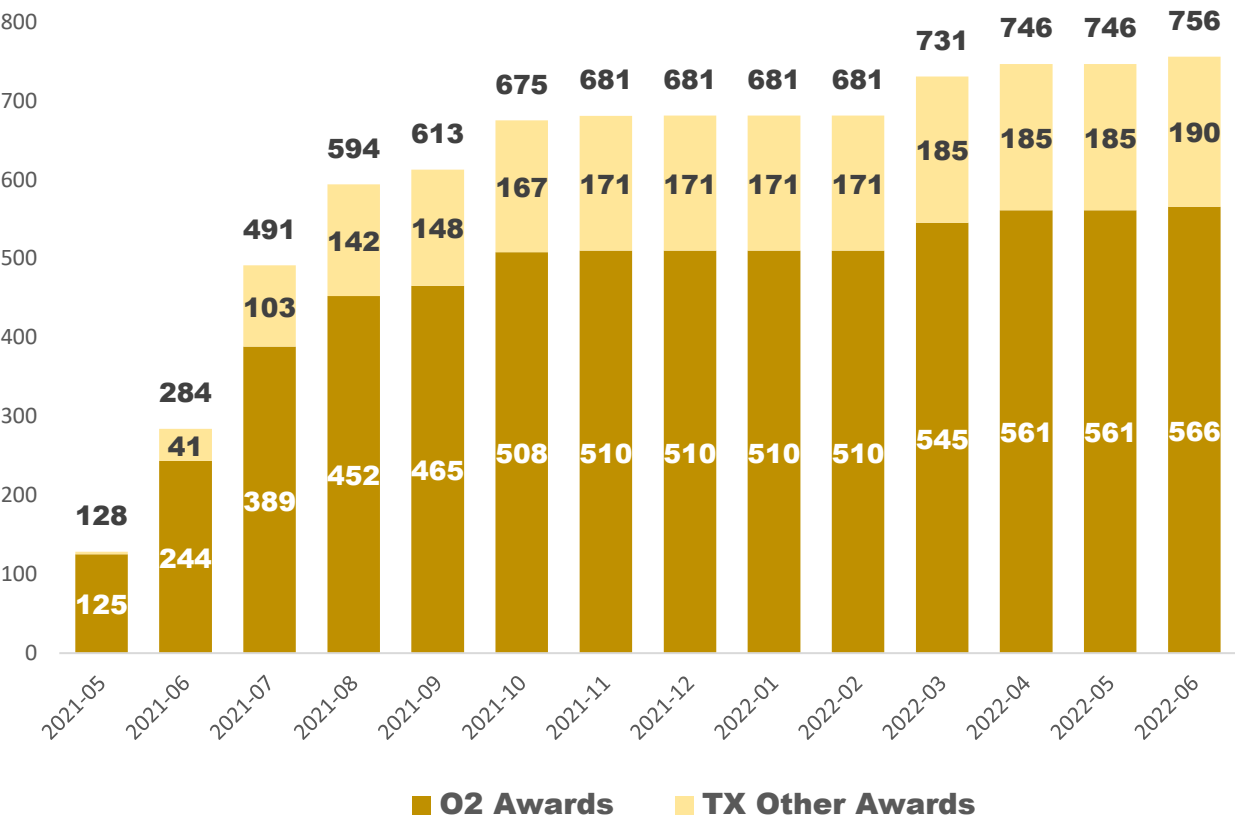
Top TA Priorities	% Countries
Support for decentralization and testing expansion	60%
Improve quality data reporting and management	40%
Bi-directional testing and routine testing integration	40%
Improve cross-program coordination mechanisms	35%
Lab staff training and capacity building	30%
Integrate COVID-19 data systems with other diseases	30%

Capacity building for Wastewater Based Surveillance of SARS-CoV-2

- Kenya, Mozambique, Ethiopia, and Uganda engaged in capability development and locally based Association of Public Health Laboratories (APHL) consultant assigned in each country.
- Common test protocol provided by APHL; Kenya and Mozambique protocol review underway, local revisions and approval by country MoH expected in 2-3 weeks.
- Essential reagent and supply lists developed for four countries. Vendor quotes solicitation underway including estimated item delivery dates. Report on responses and delivery timelines to be prepared (expect some items with future delivery dates in August or later).
- Twinning partnership established between Kenya National Public Health Laboratory (NPHL) and APHL Member Laboratory with two of three trainings completed; partnerships for Mozambique, Ethiopia and Uganda to be established in July.

Oxygen

Cumulative Therapeutics Awards in C19RM 2021
(US\$ million)



Substantial country demand for O2

Over US\$560 million requested for O2 products, including O2 production, storage and distribution, and patient delivery. One of the highest C19RM investment categories.

Current awards include:

- Awards for oxygen and clinical health products amount to US\$756 million representing 22% of the C19RM 2021 total funds awarded.
- US\$566 million (up from US\$561 million in April) requested for O2 products and US\$190 (up from US\$185 million in April) million for other therapeutics.

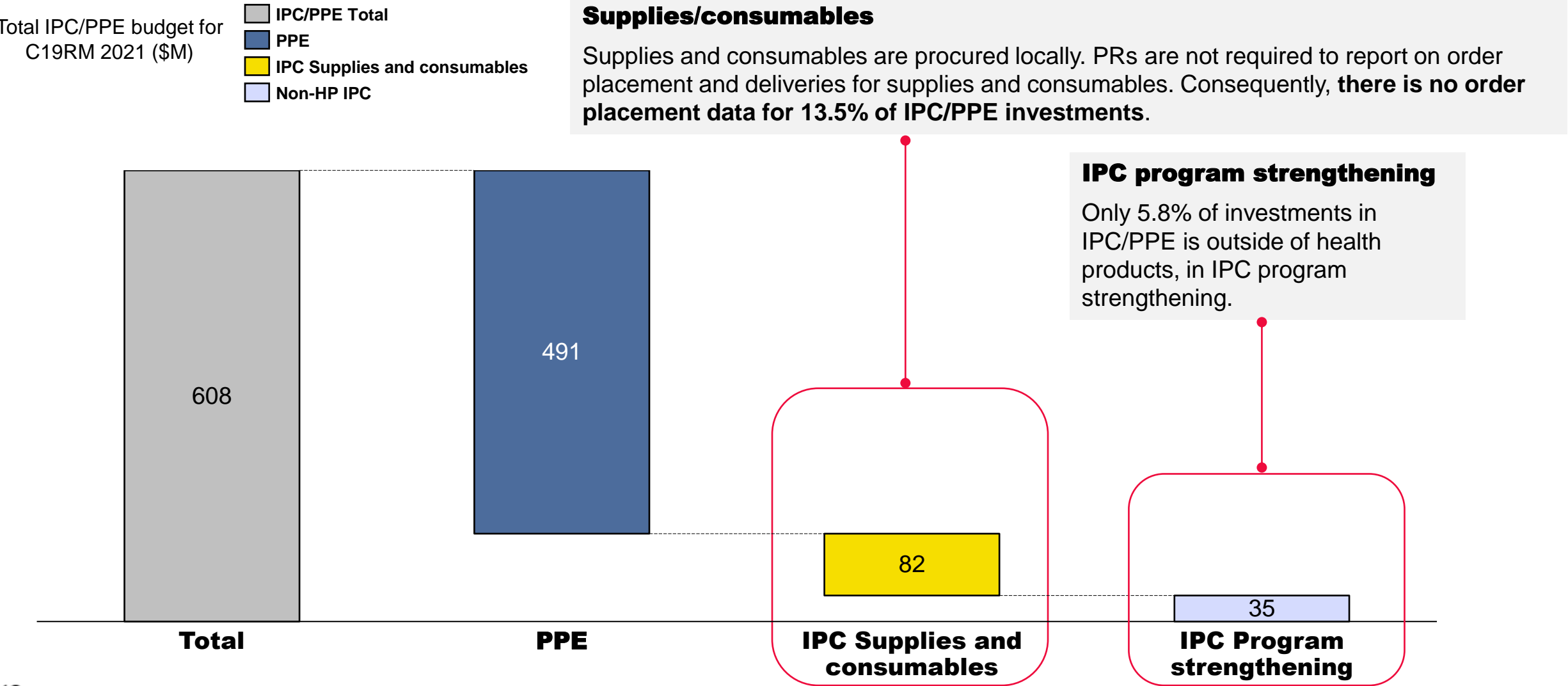
PSA* Oxygen Plants

Data shows **steady progress**

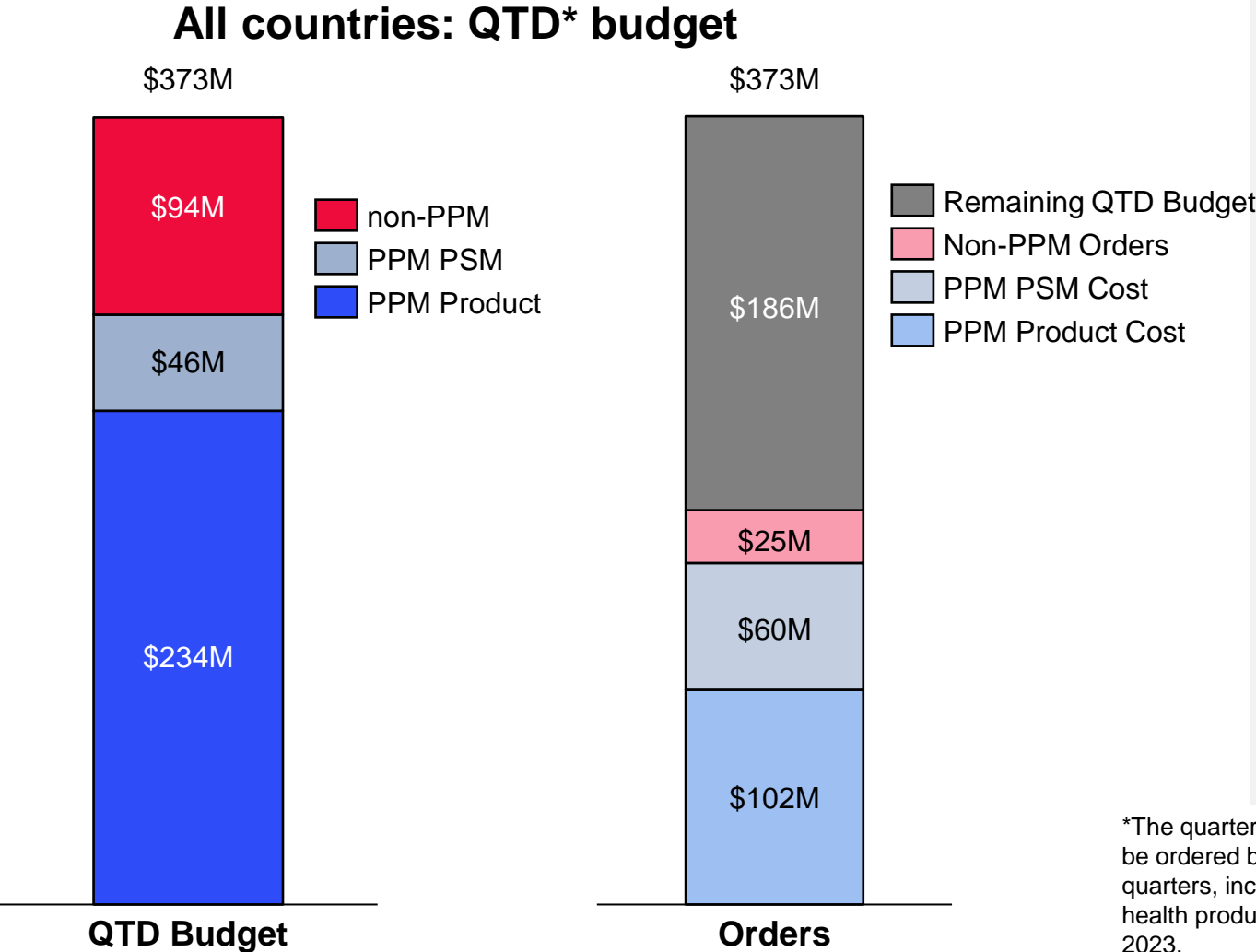
June 2022

- Technical assistance for medical oxygen, provided through **Project BOXER**, addresses the need for technical capacity-building and support in the operation of PSA plants. **Technical Assistance** is provided to **35 countries** (1 additional country compared to May 2022), supported by and aligned with ACT-A & O2 Working Group.
- The project supports LMIC to address **technical challenges** of building medical oxygen capabilities.
- Oxygen is a **lifesaving intervention for COVID-19** but also maternal health. Ensuring greater access to medical oxygen is a big step forward to strengthen acute clinical care and **reinforce countries preparedness for future pandemics**.

IPC/PPE investments represent 17.7% of the total of C19RM 2021, out of which 94.2% is budgeted for health products.



US\$184 million (out of US\$373 million of quarter-to-date budget) in PPE orders has been reported as placed with lower budget conversion for non-PPM compared to PPM.



Budget conversion

PPM budget conversion against the quarter-to-date (QTD) budget is 58% compared with 27% for non-PPM**, based on reported data.

Challenges with the quality and timeliness of non-PPM reporting make data for this channel less reliable.

The quarter-to-date budget that has not been used is US\$186 million, though falling PPE prices has led to many countries ordering larger quantities for smaller financial amounts than initially budgeted.

PSM costs

PSM costs represent a much larger percentage of the orders placed (38%) than initially budgeted (16%), due to falling PPE prices and increasing freight costs.

*The quarter-to-date (QTD) budget refers to the US\$ amount budgeted for health products to be ordered by the end of that quarter. As a cumulative metric it sums up all previous quarters, including the current quarter. This representation is used for analysis purposes as the health products budget is for a three-year implementation period from January 2021 to December 2023.

**The non-PPM QTD has changed with respect to the previous month following newly-integrated country feedback.

Data source: HPMT for budget, Wambo for PPM orders, non-PPM reporting for non-PPM, and PSA for deliveries (cut-off date 30 May 2022). Pulse Checks Q1 2022

IPC program strengthening in C19RM 2021 has been included in several low-cost, high-impact investments.

Breakdown of IPC program strengthening investments

- ①

HR capacity [US\$10.5M, 28% of total]
Example: Central African Republic – US\$67K to train 300 HCW on PPE / IPC
- ②

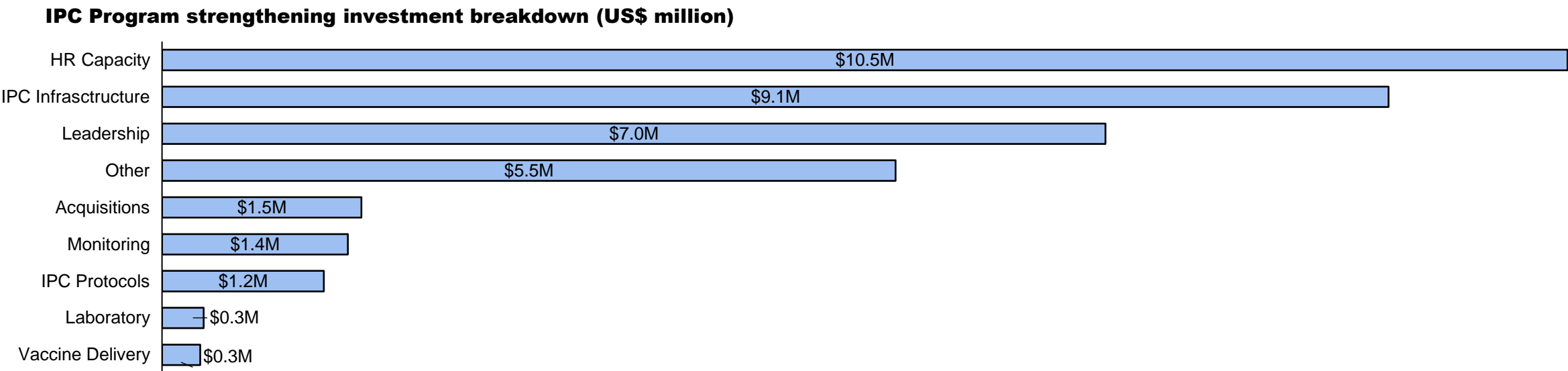
IPC infrastructure [US\$9.1M, 25% of total]
Example: Cameroon – US\$84K to maintain boreholes in 100 treatment sites
- ③

Leadership [US\$7.0M, 19% of total]
Example: Azerbaijan – US\$130K to establish national IPC team and program
- ④

Monitoring [US\$1.4M, 4% of total]
Example: Dominican Republic – US\$8K to monitor IPC at national COVID hospitals
- ⑤

IPC protocols [US\$1.2M, 4% of total]
Example: Uganda – US\$44K to review, print, and disseminate IPC guidelines
- ⑥

Other interventions [US\$7.4M, 20% of total]
Includes acquisitions, laboratory safety, HCW vaccination programs, etc.



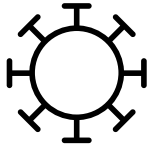


Reinvesting C19RM Funds



Three key areas identified as high value C19RM reinvestment opportunities

Revisit readiness of opportunities within existing C19RM scope for scale-up and filling gaps



Adapt COVID-19 responses and interventions to current context

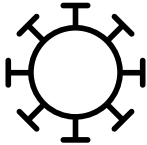
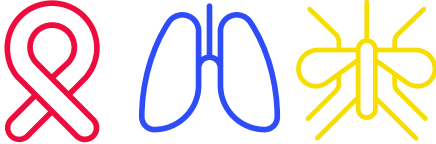



Enable HIV, TB and malaria program integration and mitigation



Enhance systems and infrastructure to boost responses

Country Demand for Reinvestment in Priority areas

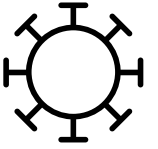
C19RM Board Priority Area	Strategic Priority Investment Areas
1. Reinforce COVID-19 national response	<ul style="list-style-type: none">• Re-quantify COVID-19 diagnostics and PPE• Infection preventions and control• Novel therapeutics; Test and Treat programs• Ramp up Oxygen investments* 
2. Mitigate COVID-19 impact on HIV, TB and malaria programs	<ul style="list-style-type: none">• Cover additional costs of procurement and supply management (PSM) of health products• Bi-directional screening TB/COVID-19 integration• HIV, TB, and malaria commodities remain outside C19RM scope (except TB cartridges as part of integrated response) 
3. Urgent improvement to health and community systems	<ul style="list-style-type: none">• Pandemic preparedness• Laboratory systems strengthening, including lab and medical equipment**• Surveillance, data systems and response• Community health workers• Supply chain and waste management• Bring forward RSSH plans 

Indicative needs (US\$) for priority investment areas are to be confirmed

* It will also help improving 3) Urgent improvement to health and community system. ** It will also help improving 2) Mitigate COVID-19 Impact.

Establish Test & Treat Programs

Adapt COVID-19 responses and interventions



Background

- Although current WHO guidelines recommend multiple novel therapeutics, current emphasis of test and treat is on the oral antivirals such as molnupiravir and nirmatrelvir/ritonavir (Paxlovid).
- Over the past few months, WHO has issued country surveys of demand for both of these products, and work is on-going to define specific quantities and available funding in many countries. WHO and other partners have developed country readiness tools, while integrated operational guidance remains under development by WHO/WHE and Africa CDC.
- Relative prioritization of test and treat will depend on country context, including the epidemiologic situation and dynamic response needs, including consideration of minimum preparedness for future surge needs based on co-variants, etc.

Key Recommendations

- Consider engaging the diagnostics, case management/clinical services and/or other relevant unit(s) from the national COVID-19 response coordinating body.
 - In settings where this group is no longer functional, engage the pandemic preparedness body over-seeing the national action plan for health security, or similar.
- Determine the relative prioritization of, demand for, and gaps in financing for test and treat services based on the above, including preparedness for future surge.
 - If gaps in financing are identified based on established demand, consider a proposal related to C19RM re-investment, if/where appropriate, including CCM engagement strategy.
- Assess country readiness, including landscape assessment of related activities.
- Develop integrated service delivery model addressing tiered diagnostic, referral, clinical assessment, and triage; and define immediate minimum and surge implementation needs.
- Determine appropriate health product procurement mechanism.
- Seek partner technical assistance, whether in-country or external, as needed.

Addressing increased HTM PSM costs



Cost of HTM health products and related PSM costs are increasing in the ongoing COVID-19 context. Global needs will be covered across HTM funds and C19RM funds.

Background	<ul style="list-style-type: none"> • Meaningful increase in PSM costs for HTM products due to multiple factors, including the economic impact of COVID-19, disruption of supply chains and increase in underlying costs. Nature of cost increase is dynamic. • Increased cost of HTM products – e.g., expected cost increase of malaria bed nets (petrochemical-based products). • Increased pressure on HTM grants (particularly malaria) - HTM grants may not be able to absorb additional costs without negatively impacting program objectives and/or scale-up.
Eligibility	<ul style="list-style-type: none"> • Additional delivery and procurement costs for HTM programs where related to addressing COVID-19 disruption are eligible under C19RM funding (GF/B44/ER12)
Approach	<ul style="list-style-type: none"> • HTM grants will cover any increase in the unit price costs of HTM health products. For increases to HTM PSM costs (including freight, warehousing and distribution costs), C19RM funds can be used for the incremental that cannot be covered by the HTM grants. • Estimated costs: Supply Operations has estimated that the additional HTM PSM costs for both PPM and non-PPM procurements are in the range of US\$120-160 million, with PSM costs for malaria bed nets representing ~80% of the additional costs: <ul style="list-style-type: none"> ○ <u>Likely scenario</u>: US\$120 million range with approx. US\$70 million for international freight and US\$50 million in-country PSM ○ <u>More conservative scenario</u>: US\$160 million with approx. US\$100 million for international freight and US\$60 million in-country PS • Operationalization: Where net increases in PSM costs exceed available HTM and C19RM savings, funds can be requested through C19RM Portfolio Optimization.



Pandemic Preparedness

Enhance Systems and Infrastructure to boost responses

Pandemic Preparedness

- Most Global Fund-eligible countries implemented assessments of pandemic preparedness known as joint external evaluations, or JEEs, prior to the COVID-19 pandemic.
- In many instances, these evaluations have been translated into national action plans for health security (NAPHS).
- Multi-year, typically costed, NAPHS are usually converted to annual, prioritized operational plans based on established country governance and oversight, e.g., led by Ministries of Health.

Recommendations for C19RM Reinvestment

- Engage the national IHR focal point and the COVID-19 response head.
- Identify priority NAPHS activities which are consistent with C19RM guidance (information note) which is based on related WHO response operational pillars.
- Develop a proposal and engage PR(s) and CCM to establish proposal as a suitable priority for re-investment.

Reinvesting C19RM Funds – Looking ahead

Continuous re-investment process throughout lifecycle of grants to respond to evolving context and needs

Strategic investment priorities to maximize impact and use of funds

- Work with countries to **identify root causes and challenges** and priority areas for investment.
- **Information sessions and communications** to support CTs, CCMs, LFAs, PRs to adapt investments.
- Update **C19RM Guidelines** and **Technical Info Note**.
- **Operational Update** communications to **CCMs, PRs and LFAs**.

Strengthen actions to re-invest C19RM funds

- Countries undertake **exercises to reinvest C19RM savings and underutilized budgets** between **Jun and Sep 2022***.
- **Reinvestment outcomes documented** and shared with the Secretariat for monitoring.

C19RM Unfunded Demand

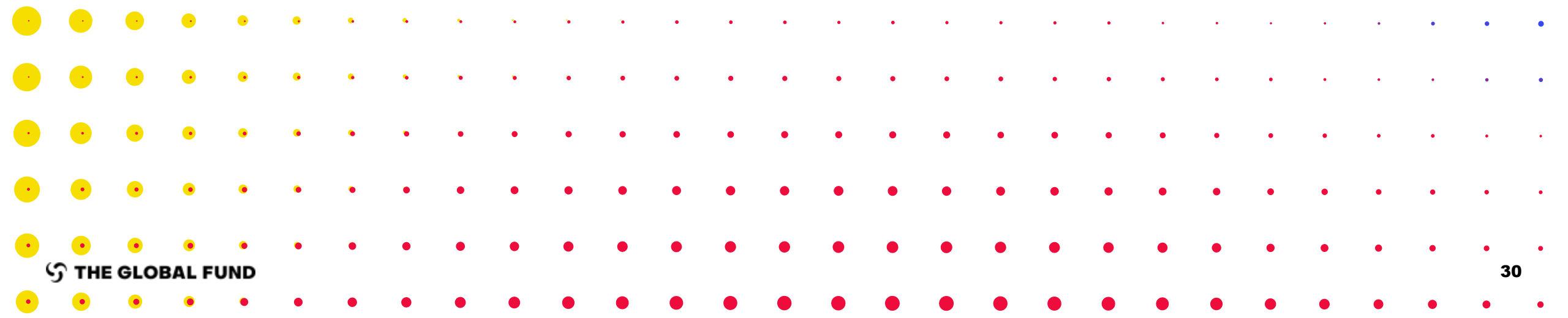
- **Outstanding needs identified** for unfunded demand through re-investing exercises.
- **C19RM unfunded demand registered by end Sep***.

C19RM Portfolio Optimization

- Develop and operationalize **C19RM Portfolio Optimization Framework**.
- **Engage GAC/CTAG** in C19RM Portfolio Optimization process.
- **Remain open for countries to submit requests** for additional funds (including Fast-track) to address spectrum of COVID-19 epidemic scenarios / future waves.
- **Execute C19RM Portfolio Optimization by end Q4 2022***.



7 Country Case Studies





UNITE^{TO} FIGHT

COVID-19 RESPONSE MECHANISM

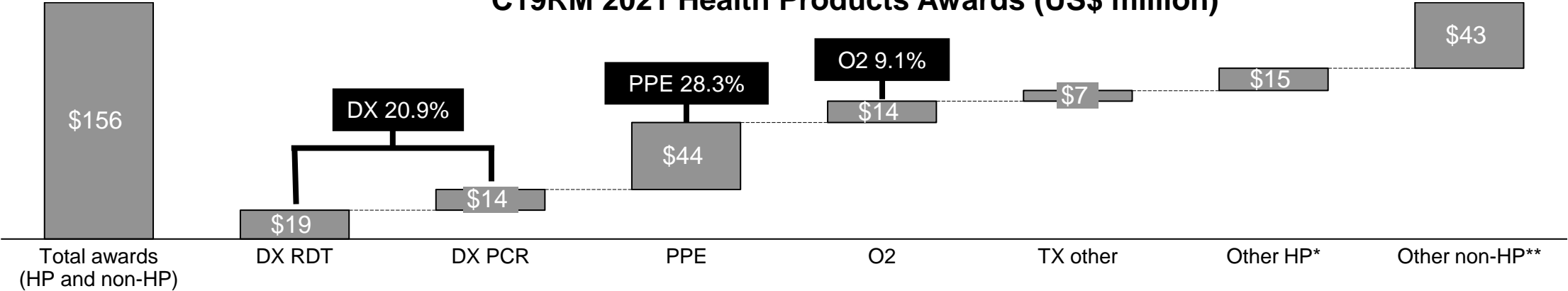
COUNTRY PROFILE

High-Impact Africa 2 Uganda

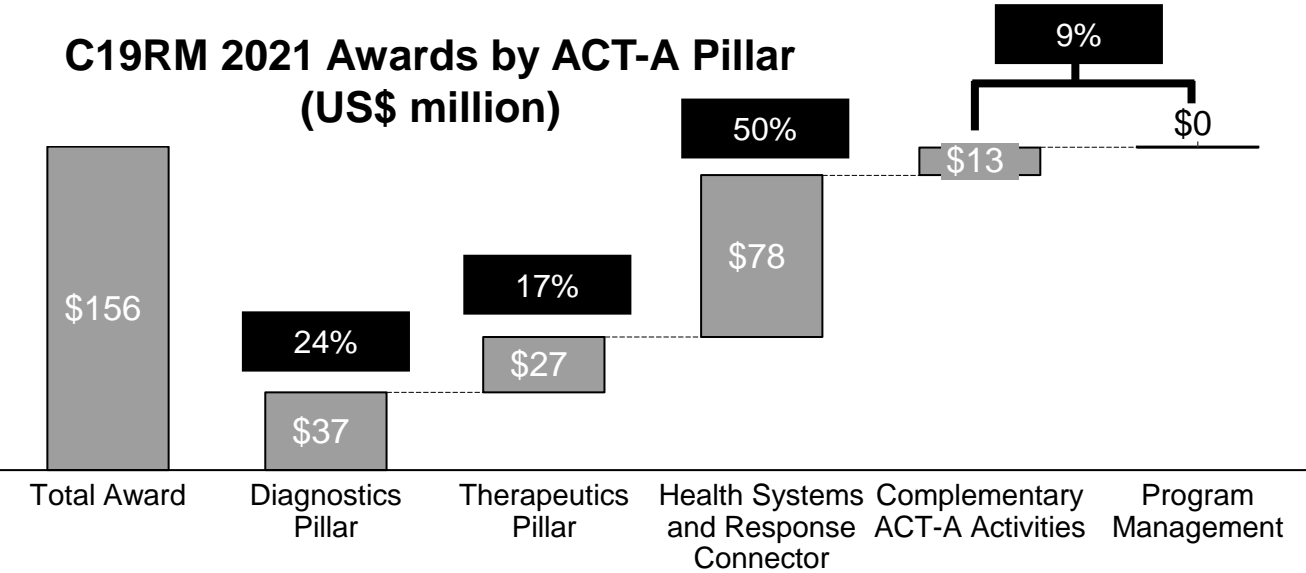
Uganda - C19RM Awards Overview

Uganda has been awarded a Full Funding Request (US\$127 million) in 2021 and, more recently, an Additional Fast-track (US\$29 million).

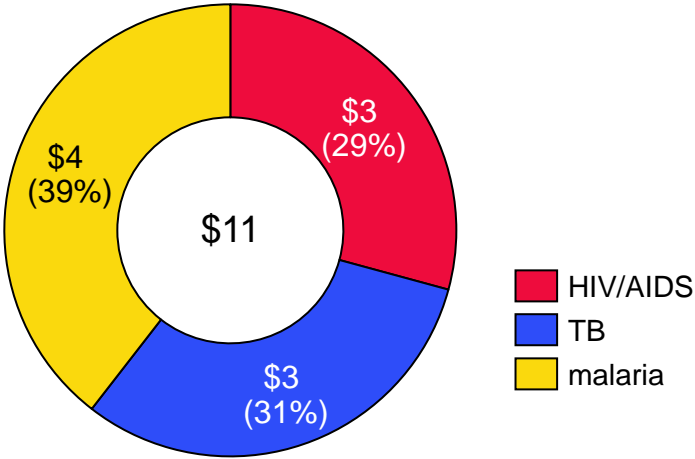
C19RM 2021 Health Products Awards (US\$ million)



C19RM 2021 Awards by ACT-A Pillar (US\$ million)



C19RM 2021 Awards in Mitigation (US\$ million)



*Other Health Products include: non-PPE disinfectants, waste management and genomic sequencing.
**Other non-Health Product investments include: most activities within Mitigation and Urgent as well as non-health product awards within Reinforce.

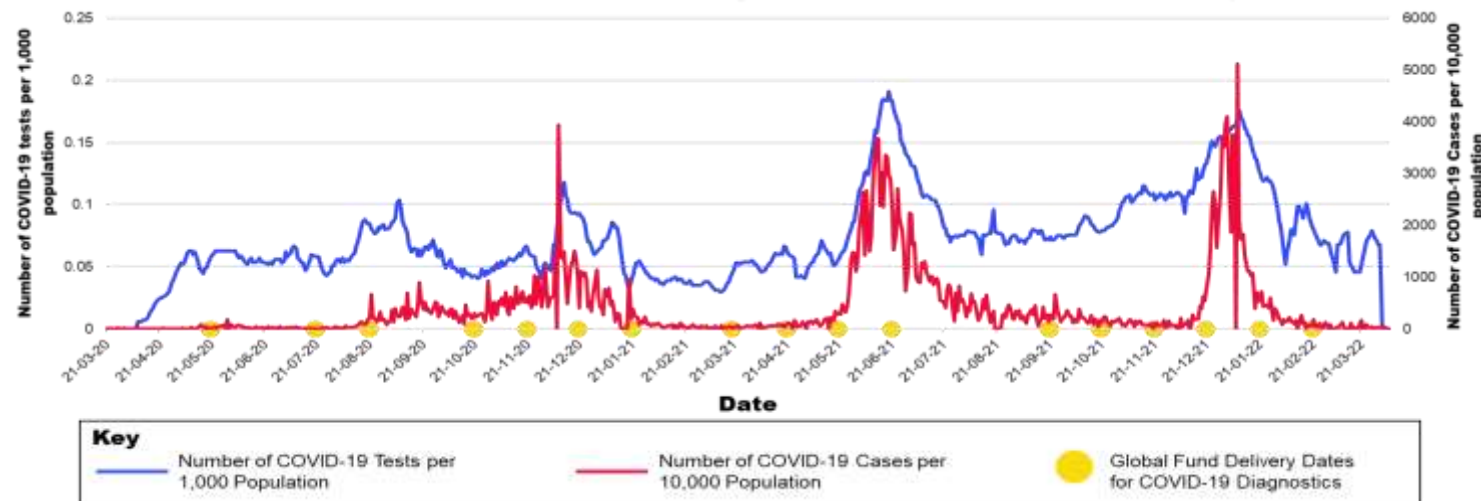
Reinforcing the COVID-19 Response in Uganda

Highlights

- With the Global Fund's support, **Uganda** was able to **quickly respond to COVID-19**.
- The Global Fund's **strong partnership with the government of Uganda, civil society and partners** has seen **C19RM investment quickly translated into service delivery** on the ground.
- C19RM investments in Uganda have supported continuous **COVID-19 testing** throughout the **COVID-19 waves**, improving both community and facility-based diagnosis.
- Through **Project STELLAR** there is a drive to further **increase testing coverage** through training and developing **community-based testing** policies, as well as strengthening surveillance through wastewater-based surveillance (WWBS) pilots and strengthened data management systems.
- **Community platforms** and set-ups have also been successfully leveraged to ensure **HIV, TB and malaria program continuity**.

COVID-19 Testing Rates Vs. Cases

Source: Uganda Ministry of Health

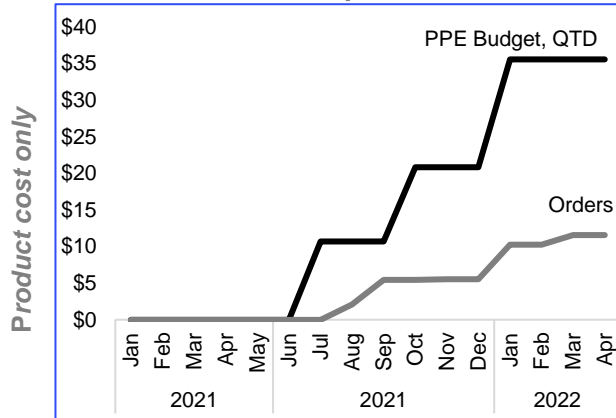


C19RM investments for urgent need of COVID-19 diagnostic tests

- Associated **laboratory commodities** following rising case numbers in early 2021.
- Since July 2021 **US\$9.4 million of orders for diagnostics placed** and **> 90% delivered**.
- COVID-19 diagnostics procured by the Global Fund have been utilized continuously in Uganda since the beginning of the pandemic and **contributed significantly to the national response**.
- By March 2022 **> US\$6 million COVID-19 tests** were **delivered** to Uganda, of which 70% were procured through C19RM grants supported by the Global Fund.

Uganda: Focus on C19RM Investments

PPE PPM order placement



IPC/PPE is one the Global Fund’s largest areas of investment in COVID-19 response.

- In addition to locally procured PPE in 2020, significant quantities procured through PPM were delivered and utilized throughout 2021.
- US\$17.3 million in orders have now been placed leveraging the C19RM 2021 award with deliveries starting to arrive in country from early 2022 onwards. Orders have been staggered to reflect existing stocks and warehousing capacity. Significant orders are also in the pipeline.
- PPE procured through C19RM investment in 2020 and 2021 has been extensively utilized in health care facilities, as well as community set-ups, to help ensure continuity of service provision.

Source: Wambo & HPMT order data as of 9 May 2022

Ugandan Success Story

- **Program adaptations:** **HIV:** introduction of differentiated service delivery models, with focus on safety and security of service delivery for key vulnerable populations. **TB:** bi-directional testing plus Active Case Finding toolkit in 50 districts, which improved TB patients screening. **Malaria:** community case management, a focus on PPE for health and community workers, and LLIN mass campaigns adaptation.
- **Community Engagement, Human Rights and Gender:** C19RM investments supported strengthening community systems and the provision of legal support for key populations, adherence to treatment and delivery of essential preventive and treatment commodities.
- **System Strengthening:** investment in oxygen supply systems, health care waste management systems, surveillance, and laboratory systems/network. Human resources for health capacity was enhanced through trainings to ensure effective operationalization of investments in health systems, equipment and procurements.