2020-2022 Funding Cycle

ACCESS TO FUNDING

JANUARY 2020
Agenda

1. Background
2. Applying for funding
3. How to prepare for the funding cycle
4. Additional resources
5. Question and Answer
Background

Allocation process

Available sources of funds for country allocation = $12.71 billion

+ catalytic investments

HIV (50%)
TB (18%)
Malaria (32%)

Allocation formula using approved technical parameters

Formula derived amounts

Transparent qualitative adjustments

Country allocation with flexibility on program split

Funding request for allocation + PAAR (+ matching funds if eligible)

$890 million

$890 million
Expected Outcomes:
1. Documented evidence of the inclusive dialogue to comply with ER 1 and ER 2
2. Endorsement of the funding request by CCM members

CCM Eligibility Requirements*

ER1
- Transparent and inclusive funding request development process

ER2
- Transparent and documented Principal Recipient (PR) selection process

*screened at the time of submitting a funding request
Applying for funding
Country Dialogue and Role of Civil Society

• Get connected
  o With your community
  o With the CCM
  o Request technical assistance if needed

• Prepare ideas
  o How does malaria affect your community? Which health services are available and being used? How to improve them? What investments would maximize impact and value for money?

• Join the dialogue
  o Ensure your community is represented during country dialogue

theglobalfund.org/countrydialogue
The Secretariat will transparently communicate in the allocation letter where allocation-related decisions or outcomes have intended implications around use of funds and closely monitor any changes to the program split for those components.
Applying for funding
Alignment with National Strategic Plans

The allocation-based funding model emphasizes alignment to country processes, and it aims to incentivize the development of robust, costed and prioritized National Strategic Plans as well as the overall national health strategy.

Ideally based on Country Dialogue

Inclusive Country Dialogue Expected

Funding Request
With prioritized programmatic gaps

Prioritized Above Allocation Request
Applying for funding
Application approaches

- Full Review
- Program Continuation
- Tailored for National Strategic Plans
- Tailored for Focused Portfolios
- Tailored for Transition

Core and High Impact Countries
Focused Countries
Applying for funding
Thematic sections common to all Funding Requests

Context
- Country Context
- Funding Request Prioritization
- Opportunities for Integration
- Value for Money

Request
- Implementation Arrangements

Implementation
- Risk

Sustainability
- Co-financing, Sustainability & Transition
Applying for funding
Key Annexes: for all applications

- Budget
- Performance Framework
- Funding Landscape Table
- Programmatic Gap Table
- Prioritized Above Allocation Request
- Essential Data Table
- CCM Endorsement of Funding Request
- CCM Statement of Compliance
- Co-Financing Documentation
- National Strategic Plan
- Implementation Arrangement Map*
- Health Product Management Tool*
- Transition Readiness Assessment and/or Transition Plan*

* Not required for all applications
## Applying for funding

### Prioritized Above Allocation Request

The PAAR is a list of prioritized and costed requests that cannot be funded by the allocation. Approved requests are placed on the Register of Unfunded Quality Demand.

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<th>Applicant Priority Rating</th>
<th>Module</th>
<th>Intervention</th>
<th>Requested amount (grant currency)</th>
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Applying for funding
Prioritized Above Allocation Request to Unfunded Quality Demand (UQD)

Requested PAAR: 4,685
Original UQD amount: 4,341
Remaining UQD amount*: 2,962

Source: Access to Funding database
As of 27 Sep 2019
*Expected UQD amount remaining in anticipation of full Portfolio Optimization award amounts (waves 1-3) being incorporated into grants.
Applying for funding
The Technical Review Panel

The Technical Review Panel is an independent, impartial team of experts appointed to ensure Global Fund investments will achieve highest impact through a rigorous technical assessment.

Inputs
Reviews: Funding request + key annexes
Consider:
• Allocation letter and other communication from the Secretariat
• Secretariat Briefing Note
• Previous TRP forms

TRP review criteria
Maximizing impact against HIV, TB, and malaria
Building resilient and sustainable systems for health
Promotes and protects human rights and gender equality
Increasing effectiveness and efficiency: program implementation
Sustainability and co-financing

TRP outcome: Review and Recommendation Form
Grant-making: with or without adjustments
OR
Iteration: revise and resubmit, addressing TRP comments
Recommendation for Unfunded Quality Demand from the PAAR
May recommend re-prioritization of interventions within the funding request or PAAR, as applicable
Applying for funding
TRP observations report 2017-2019 highlight 5 areas for increased attention

1. Improve priority setting
2. Increase focus on prevention and reducing incidence
3. Strengthen cross-cutting RSSH programming
4. Strengthen community systems
5. Increase attention to sustainability

https://www.theglobalfund.org/en/technical-review-panel/reports/
Applying for funding
Grant Making

Translation of the approved interventions, based on the TRP recommendations, into implementation-ready grants for Board approval and signature

Create work plan for the development of the grant documents

Negotiate grant documents and implementation details with Principal Recipients

Identify and mitigate capacity gaps and risks related to the grant implementers and grant implementation
Applying for funding
The Grant Approvals Committee & Board approval

GAC reviews implementation-ready grant and submits a final report to the Board

The Board reviews and approves the grants

The Global Fund signs the grant agreement after the Principal Recipient and CCM have signed

The Global Fund processes the first annual funding decision
Applying for funding

No change to key process points

- Funding Request Submission
- TRP Review
- GAC Review
- Board Approval
- Grant Signing
- Grant Implementation Begins
- Program Split
- Screening

APPLICATION PROCESS: 6-9 MONTHS
GRANT IMPLEMENTATION: 3 YEARS

TheGlobalFund
How to prepare
Planning backwards

The country should estimate when they plan to access funds

Current implementation period

Next 3-year IP

Grant end date

Expected grant start date

Plan backwards

- Submission Window
- Grant Submission

2 months funding request development
2 months review
3-5 months grant-making
1.5 months GAC/Board approval
1 month grant signing
1-2 months preparing implementation

- Submission Window
- Grant Submission

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The country should estimate when they plan to access funds

Plan backwards
### How to prepare

**TRP Windows**

<table>
<thead>
<tr>
<th>TRP Window</th>
<th>Submission</th>
<th>Review Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Window 1</td>
<td>23 March</td>
<td>27 April – 2 May</td>
</tr>
<tr>
<td>Window 2</td>
<td>25 May</td>
<td>29 June – 5 July</td>
</tr>
<tr>
<td>Window 3</td>
<td>31 August</td>
<td>5 – 11 October</td>
</tr>
</tbody>
</table>
How to prepare
Best practices: Funding Request Submission

1. **Complete key annexes** (e.g. Funding Landscape Table and Programmatic Gap Table) before starting to fill out the funding request narrative.

2. Data should be **consistent** across funding request narratives and attachments (e.g. financial data across the funding request narrative, Funding Landscape Table and commitment letter).

3. If the data / information is complete and **analysis is comprehensive** at the funding request submission stage, applicants should have a **smoother grant-making process**.

Data should be consistent across funding request narratives and attachments (e.g. financial data across the funding request narrative, Funding Landscape Table and commitment letter).
How to prepare
Partners, CCMs, CTs

Plan
- Discuss the right submission date for the funding request

Engage
- Prepare data and analysis to support program split discussions
- Reflect on areas for step-change in current grants (e.g. review TRP report and assess if areas such as strengthening cross-cutting RSSH programming, or increasing focus on prevention should be addressed?)
- Plan and execute inclusivity and transparency of funding request preparation
- Ensure continuity of knowledge between funding request content and development of grants

Focus
- Keep the attention on implementation; the funding request process should not divert focus
Additional resources
For External Stakeholders

Publications

eLearnings

Webinars

Presentations for External Meetings

Video:
Participating in Country Dialogue
Additional resources

Publications

Frequently Asked Questions for the 2020-2022 Funding Cycle
Modular Framework Handbook
The Applicant Handbook
Information Notes And Technical Briefs
Funding Request Instructions
### Additional resources

**E-learnings for applicants**

<table>
<thead>
<tr>
<th>E-LEARNING TITLE</th>
<th>DATE AVAILABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>An Overview of The Funding Process</td>
<td>Nov</td>
</tr>
<tr>
<td>What is New or Different for 2020-2022</td>
<td>Nov</td>
</tr>
<tr>
<td>Achieving Inclusive Country Dialogue for CCMs</td>
<td>Dec</td>
</tr>
<tr>
<td>How to Apply Using the Tailored for National Strategic Plan Application Approach</td>
<td>Dec</td>
</tr>
<tr>
<td>How to Apply Using the Full Review Application Approach</td>
<td>Dec</td>
</tr>
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<tr>
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<tr>
<td>How to Apply Using the Tailored for Transition Application Approach</td>
<td>Dec</td>
</tr>
<tr>
<td>Understanding the Performance Framework and Budget</td>
<td>Jan</td>
</tr>
<tr>
<td>Understanding the Programmatic Gap and Funding Landscape Tables</td>
<td>Jan</td>
</tr>
<tr>
<td>Understanding Co-financing and Sustainability</td>
<td>Jan</td>
</tr>
</tbody>
</table>
Questions?
**Background**

*Eligibility*

Eligibility is determined by a country’s income level and disease burden.

<table>
<thead>
<tr>
<th>Income level</th>
<th>Disease Burden</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Income Countries (LICs)</td>
<td>No restriction</td>
<td>✔</td>
</tr>
<tr>
<td>Lower-Middle Income Countries (LMICs)</td>
<td>No restriction</td>
<td>✔</td>
</tr>
<tr>
<td>Upper-Middle Income Countries* (UMICs)</td>
<td>High</td>
<td>✔</td>
</tr>
<tr>
<td></td>
<td>Not High</td>
<td>✖</td>
</tr>
<tr>
<td>High Income Countries</td>
<td>n/a</td>
<td>✖</td>
</tr>
</tbody>
</table>

* Upper-middle income countries not on the OECD Development and Assistance Committee’s list of recipients of Official Development Assistance are not eligible unless they have demonstrated barriers to providing funding for interventions for key populations, as supported by the country’s epidemiology. Upper-middle income countries classified by the International Development Association (IDA) as ‘Small Island Economy Exceptions’ are eligible regardless of disease burden.

The Global Fund Eligibility List identifies country components eligible to receive an allocation

BUT eligibility does not guarantee an allocation
From Submission to Signatures
Screening for CCM Eligibility 1&2

1. Transparent and inclusive funding request development process

2. Open and transparent PR selection process

3. Overseeing program implementation and having an oversight plan

4. Document the representation of affected communities

5. Ensure representation of non-governmental members through transparent and documented processes

6. Develop, publish and follow a policy to manage conflict of interest that applies to all CCM members, across all CCM functions

1 and 2 assessed at FR submission

3 to 6 monitored on going basis
Co-financing & Application Focus Requirements

<table>
<thead>
<tr>
<th>Income Level</th>
<th>Disease Burden</th>
<th>Application Focus</th>
<th>Core Requirements</th>
<th>Co-Financing Parameters to Access Co-Financing Incentive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Income Countries</td>
<td>No restriction</td>
<td>No restriction</td>
<td>Progressive government expenditure on health (all countries)</td>
<td>Minimum 50% in disease programs</td>
</tr>
<tr>
<td>Lower-LMI Countries</td>
<td>No restriction</td>
<td>50% focus on key and vulnerable populations/interventions</td>
<td>Progressive absorption of key program costs (all countries)</td>
<td>Minimum 75% in disease programs**</td>
</tr>
<tr>
<td>Upper-LMI Countries</td>
<td>No restriction</td>
<td>100% focus on interventions that maintain or scale-up evidence-based interventions for key and vulnerable populations**</td>
<td></td>
<td>Focused on disease program and systems to address roadblocks to transition; minimum 50% in key and vulnerable populations</td>
</tr>
<tr>
<td>Upper-Middle Income Countries</td>
<td>High*</td>
<td>100% focus on interventions that maintain or scale-up evidence-based interventions for key and vulnerable populations**</td>
<td></td>
<td></td>
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</table>

*Small island economies are eligible regardless of disease burden; **UMICs may also include interventions to ensure transition readiness which include critical RSSH needs to ensure sustainability, as appropriate, as well as improve equitable coverage and uptake of services and, as appropriate, introduce new technologies that represent global best practice and are critical for sustaining gains and moving towards control and/or elimination; ***Upper LMI components with low burden are encouraged to show a greater share of domestic contributions that address systemic bottlenecks for sustainability and transition;
 Applying for funding  
Co-Financing Requirements to Access Allocations

- Two **core requirements** to access an allocation:
  1) Progressive government expenditure on health
  2) Progressive absorption of key program costs

- In addition, a co-financing incentive of **at least** 15% of the allocation available to countries if they make and realize *additional commitments* with the following focus:
  - More flexibility to focus on health systems in LICs and LMICs
  - More targeted focus on disease programs, key and vulnerable populations, and transition and sustainability priorities as countries move along the development continuum

- Processes for *negotiating, tracking, reviewing, and confirming commitments* are embedded into Global Fund access to funding processes (country dialogue, Funding Request and Technical Review Panel review, grant-making, Grant Approval Committee Review, Board approval)

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<table>
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<th>Minimum 15% Co-Financing Incentive</th>
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* "low" burden country components are encouraged to show a greater share of domestic contributions that will address systemic bottlenecks for transition and sustainability.
### Background

#### Catalytic Investments

<table>
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<tr>
<th>Matching funds</th>
<th>Multi-country (regionals)</th>
<th>Strategic initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>A matching pool available to select countries at the time of allocation to incentivize funding requests that include key strategic priorities.</td>
<td>Funds are for a number of select multicountry initiatives, which are critical for the global response against HIV, TB and malaria.</td>
<td>Strategic areas not able to be addressed through country allocations, e.g. Emergency Fund, funding to strengthen community &amp; civil society engagement, etc.</td>
</tr>
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### Applying for funding
Application approaches decision process

<table>
<thead>
<tr>
<th>Step</th>
<th>Question</th>
<th>Action</th>
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<tbody>
<tr>
<td>1</td>
<td>Is the applicant pre-identified for the NSP Application Approach?</td>
<td>If YES → NSP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If NO → go to 2</td>
</tr>
<tr>
<td>2</td>
<td>Is the applicant required to submit a transition application approach?</td>
<td>IF YES → Transition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If NO → go to 3</td>
</tr>
<tr>
<td>3</td>
<td>Is the applicant a focused country?</td>
<td>If YES → FOCUSED</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If NO → go to 4</td>
</tr>
<tr>
<td>4</td>
<td>Does the grant end by 30 June 2021?</td>
<td>If YES → go to 5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If NO → postpone decision until</td>
</tr>
<tr>
<td></td>
<td></td>
<td>grant performance is known</td>
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<tr>
<td>5</td>
<td>Does the applicant meet the Program Continuation (PC) criteria?</td>
<td>If YES → PROGRAM CONTINUATION</td>
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<td></td>
<td></td>
<td>If NO → FULL REVIEW</td>
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Approval on all country / component application approaches at end Nov GAC
Program Continuation: for Core or High Impact portfolios with a component that:

1. Did not use Program Continuation during the 2017-2019 funding cycle

2. Demonstrated good grant and program performance during the 2017-2019 funding cycle

3. Have an allocation change of less than 30 percent compared to the 2017-2019 funding cycle

4. If the above criteria are met, the Secretariat assesses whether or not material change* is envisaged/needed

Note: exclude NSP recommended + single components when joint submission for TB/HIV required

*(as defined in the OPN on grant revisions)
How to prepare
Planning submission window
### SUMMARY:
- Lists prioritized and costed modules and interventions not included in the allocation amount
- Should be at least 30% of the allocation amount
- Must be submitted at the same time as the funding request. Can be updated later in the cycle only under certain conditions.
- Approved interventions are transferred to the Register of Unfunded Quality Demand (UQD) and can be incorporated into grants if additional resources become available

### HOW WE USE IT:
- TRP reviews the PAAR alongside the main funding request, applying the same review criteria
- TRP deems if interventions in the PAAR are technically sound, strategically focused and positioned to achieve the highest impact

### LINKING TO THE APPLICATION FORM:
- Section 2: Funding Request and Prioritization
- Programmatic Gap Table

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**Prioritized Above Allocation Request (PAAR)**

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SUMMARY:
- Pre-filled tables of indicators for HIV, TB, malaria and RSSH
- Uses publicly available datasets
- Applicants are encouraged to use the data as reference while developing the funding request
- Applicants are encouraged to review the data and update or correct it if more recent or different data is being used for analysis
- The TRP welcomes the submission of additional datasets that may not be included in the Essential Data Table and would support the funding request analysis/prioritization.

WHY WE HAVE IT:
- Help applicants to develop a data-based funding request
- To trigger cross-cutting approaches and to help identify opportunities for integration across the broader health sector
- Help TRP review funding requests using a consistent data source

LINKING TO THE APPLICATION FORM:
- Section 1: Context Related to the Funding Request
SUMMARY:
• Illustrates the total funding need for the health program and how the country plans to come up with that money: domestic resources, other external donors, and the GF investment
• Enables applicants to have a good handle on developing their NSP to meet disease outcomes and how much money will be needed to finance their health programs
• Used to track co-financing compliance

WHY WE HAVE IT:
• Enables the GF to manage partnerships and understand what other donors are paying (external resources) → Better engage in the conversation to see what other players are doing

LINKING TO THE APPLICATION FORM:
• Section 2: Funding Request and Prioritization
• Section 3: Operationalization and Implementation Arrangements
• Section 4: Co-Financing, Sustainability and Transition
SUMMARY:
• Summarizes national goals and targets, including key programmatic needs and gaps on Excel tables
• Details the change achievable by domestic and external contributions, along with Global Fund support
• Displays needs and gaps in selected modules that are key to achieving impact
• Includes coverage targets for the allocation remaining gap that can be used to prepare PAAR

WHY WE HAVE IT:
• Holistic view of expected outcomes/results to guide strategic investments
• Strategic directions of the funding aligned to NSPs / investment plan targets
• Contribution of all stakeholders in achieving national targets
• Prioritization of funding request

LINKING TO THE APPLICATION FORM:
• Section 2: Funding Request and Prioritization
• Section 4: Co-Financing, Sustainability and Transition
• PAAR
• Also informs the PF and Budget
SUMMARY:
• Links program goals and objectives to program areas (modules), interventions, related indicators
• Focuses on impact, outcome and coverage indicators
• Includes indicators and targets to be reported by the country in an excel template
• Includes work-plan tracking measures in cases where no coverage indicators are possible - e.g. some RSSH modules, Human Rights interventions, etc
• Developed during funding request submission and further refined during grant-making
• Results against targets in the PF used to make routine disbursements to the Principal Recipient during grant implementation

WHY WE HAVE IT:
• Statement of expected performance over the funding request period
• Reflects the ambition towards achieving program result and impact

LINKING TO THE APPLICATION FORM:
• Section 2: Funding Request and Prioritization
• Section 3: Operationalization and Implementation Arrangements
SUMMARY:

- The budget expected at the funding request stage is the initial “best estimate” by intervention and cost grouping.
- The minimum information that should be included with funding request submission includes:
  - modules – selected from a prescribed list per disease component;
  - interventions – related to the module selected from the prescribed list;
  - proposed implementer(s);
  - cost grouping – selected from a prescribed list;
  - amount per year and per intervention in grant currency; and
  - breakdown by key populations (for programs with an HIV component).
- Applicants have the option to submit a detailed budget at the funding request stage.

WHY WE HAVE IT:

- Provides the strategic investment and intervention choices made by the applicant.
- The TRP reviews and recommends adjustments to the initial budget submitted.

LINKING TO THE APPLICATION FORM:

- Section 2: Funding Request and Prioritization
- Section 3: Operationalization and Implementation Arrangements
- Section 4: Co-Financing, Sustainability and Transition