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GLOBAL FUND BOARD APPROVES WAVE 7 RCC PROPOSALS

In December 2009, the Global Fund Board approved nine proposals in Wave 7 of the rolling continuation channel (RCC) funding stream, representing costs of up to \$451 million over three years. Of the nine proposals, three were for HIV, four for TB and two for malaria. All approvals are conditional on the applicant responding satisfactorily to clarifications requested by the Technical Review Panel (TRP).

The RCC is a separate channel of funding set up to allow applicants with strongly performing grants to apply for continuing funding for up to an additional six years beyond the original proposal term. Applications are by invitation only (the invitations are sent out by the Global Fund Secretariat).

As is its custom, the Board approved the TRP funding recommendations in block – i.e., without debating the merits of individual proposals. As a result of cost-cutting measures adopted at the November 2009 Board meeting, the Board formally approved funding only for the first two years of each proposal; funding for the third year will be approved later if there are sufficient funds available. The costs for the first two years of all approved proposals is \$257 million.

The TRP reviewed 17 proposals in all, which means that the success rate was 53 percent, which is a little lower than the average success rate for the six previous waves. (This includes both new proposals and re-submitted proposals; the success rate for new proposals was 57 percent in Wave 7, which is a little higher than the results of earlier waves.)

All of the proposals were from CCMs. Three of the 17 proposals were re-submissions of unsuccessful proposals from Wave 5; only one of these was approved. The two re-submitted proposals that were not approved were HIV proposals from Jamaica and Rwanda. The TRP rated both proposals Category 3B, which means that the applicants are strongly encouraged to re-submit their proposals through the rounds-based channel, but only after major revisions.

Eight of the 14 new proposals were approved. Five of the six new proposals not recommended for funding were rated Category 3A by the TRP, meaning that the applicants are strongly encouraged to re-submit these proposals in the next available wave of the RCC, taking into account the issues raised by the TRP. The TRP found that a sixth new proposal was “materially different” from the grant that the applicant was seeking to extend and, therefore, did not qualify as an RCC proposal. The TRP rated this proposal Category 4, which means that the applicant is not encouraged to re-work and re-submit the same proposal.

Table 1 summarises the results for the first seven waves of funding. Table 2 provides the results for Wave 7, by country.

Table 1: RCC applications and results – Waves 1-7

Wave	Number of expiring grants eligible for consideration	OF WHICH: Number and % invited to apply	OF WHICH: Number of new proposals submitted	Board decision date	Number of proposals approved	Total Total budget, budget,	
						Years	Years
						1-3	1-6
1	51	11 (22%)	10	Nov 2007	5: (1 HIV, 1 TB, 3 malaria)	\$130 m.	\$207 m.
2	31	11 (36%)	10 ¹	Apr 2008	6: (3 HIV, 1 TB, 2 malaria)	\$365 m.	\$737 m.
3	18	8 (45%)	7	July 2008	3+5 ² : (4 HIV, 1 TB, 3 malaria)	\$511 m.	\$1,033 m.
4	22	8 (36%)	8	Oct 2008	3+2 ³ : (2 HIV, 2 TB, 1 malaria)	\$229 m.	\$509 m.
5	17	8 (47%)	6	Mar 2009	3+3 ⁴ : (2 HIV, 2 TB, 2 malaria)	\$322 m.	\$705 m.
6	24	10 (42%)	10 ¹	May 2009	5+4 ⁵ : (5 HIV, 3 TB, 1 malaria)	\$263 m.	\$522 m.
7	37	15 (41%)	14	Dec 2009	8+1 ⁶ : (4 HIV, 3 TB, 2 malaria)	\$451 m.	\$1,126 m.
Total	200	71 (36%)	65		48: (21 HIV, 13 TB, 14 malaria)	\$2,273 m.	\$4,839 m.

¹ This represents nine countries; one applicant submitted a proposal containing two disease elements (which counts as two proposals in the table).

² Three of the new applications and five Wave 1 re-submissions.

³ Three of the new applications and two Wave 2 re-submissions.

⁴ Three of the new applications and three Wave 3 re-submissions.

⁵ Five of the new applications and four Wave 4 re-submissions.

⁶ Eight of the new applications and one Wave 5 re-submission.

Table 2: Wave 7 RCC results by country

Country	Component	Board Decision	Upper ceiling budget: First 3 Years	Upper ceiling budget: Up to 6 Years
China	TB	Approved: Cat. 2	\$143,632,040	\$404,800,000
Georgia	TB	Approved: Cat. 2	\$5,458,583	\$7,900,000
India	HIV	Approved: Cat. 2	\$151,916,071	\$390,400,000
Jamaica**	HIV	Not approved: Cat. 3B	\$9,816,596	\$17,700,000
Lao PDR	HIV	Not approved: Cat. 3A	\$6,622,722	\$13,200,000
Lao PDR	Malaria	Not approved: Cat. 4	\$8,080,727	\$13,600,000
Mongolia	TB	Approved: Cat. 2	\$2,968,117	\$8,500,000
Namibia	HIV	Approved: Cat. 2	\$109,055,595	\$211,800,000
Namibia	TB	Approved: Cat. 2	\$835,204	\$1,700,000
Namibia	Malaria	Approved: Cat. 2	\$2,867,671	\$17,300,000
Rwanda**	HIV	Not approved: Cat. 3B	\$76,691,579	\$187,000,000
Sao Tome e Principe	Malaria	Not approved: Cat. 3A	\$2,144,540	\$4,300,000
Suriname	Malaria	Not approved: Cat. 3A	\$1,968,850	\$2,800,000
Tanzania	HIV	Approved: Cat. 2	\$20,846,911	\$56,400,000
The Gambia*	Malaria	Approved: Cat. 2	\$13,162,021	\$26,400,000

Country	Component	Board Decision	Upper ceiling budget: First 3 Years	Upper ceiling budget: Up to 6 Years
Togo	HIV	Not approved: Cat. 3A	\$26,976,985	\$57,976,985
Uzbekistan	HIV	Not approved: Cat. 3A	\$23,713,193	\$51,713,193

* Not approved in Wave 5, but approved upon re-submission in Wave 7

** Not approved in Wave 5, and not approved again upon re-submission in Wave 7

The amounts shown in Table 2 for India and Tanzania are after budget reductions recommended by the TRP.

In Wave 7, two countries – China and India – submitted consolidated proposals, which means that their budgets included not only incremental funding, but also funding already approved for existing grants. The amounts shown for these countries in Table 2 represent only the incremental funding.

The Namibia HIV proposal, which was approved, includes some cross-cutting health systems strengthening activities.

At its November 2009 meeting, as part of the changes to the new funding architecture, the Global Fund Board decided that the RCC would be abolished. However, the decision was not effective immediately. Countries that had already been invited to apply for the RCC at the time of the Board meeting were able to submit proposals for Wave 8, the last wave for new proposals. The deadline for new proposals was 4 January 2010; for re-submissions from Wave 6, the deadline was 10 February 2010. Unsuccessful applicants from Wave 7 were also able to re-submit by the 10 February 2010 deadline.

Five countries were invited to submit new proposals for Wave 8: Burundi (HIV), Guatemala (malaria), South Africa (HIV), Sudan (malaria) and Tanzania (HIV).

Finally, there will be one final “catch all” RCC window later in 2010 for re-submissions from Waves 7 and 8.

The “Report of the Technical Review Panel and the Secretariat on Funding Recommendations for Wave 7 Rolling Continuation Channel Proposals” is available (in English only) at www.theglobalfund.org/en/trp/reports.

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