

GLOBAL FUND BOARD APPROVES WAVE 6 RCC PROPOSALS

In May 2009, the Global Fund Board approved nine proposals in Wave 6 of the Rolling Continuation Channel (RCC) funding stream, representing costs of up to \$263 million over three years. Of the nine proposals, five were for HIV, three for TB and one 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. As is its custom, the Board approved the TRP funding recommendations as a group – i.e., without debating the merits of individual proposals.

The TRP reviewed 15 proposals in all, which means that the success rate was 60 percent, which is a about the same as the success rate for the five previous waves. (This includes both new proposals and resubmitted proposals; the success rate for new proposals was just 50 percent in Wave 6, also consistent with the results of earlier waves.)

Fourteen of the proposals were from CCMs; one was from a sub-CCM. Five of the 15 proposals were resubmissions of unsuccessful proposals from Wave 4; four of these were approved. The one re-submitted proposal that was not approved was a malaria proposal from Nicaragua. The TRP rated this proposal Category 3B, which means that the applicant is strongly encouraged to re-submit the proposal through the rounds-based channel, but only after major revisions. This is only the second time that a re-submitted RCC proposal has not been approved for funding.

Only half of the 10 new proposals were approved. Four of the five new proposals that were 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 fifth new proposal was technically unsound, and rated it Category 4, which means that the TRP is not encouraging the applicant to re-work and re-submit the same proposal.

Table 1 summarises the results for the first six waves of funding. Table 2 provides the results for Wave 6, by country.

Table 1: RCC applications and results – Waves 1-6

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		Number of expiring grants eligible for considera- tion	OF WHICH: Number and % invited to apply	OF WHICH: Number of new proposals submitted	Board decision date	Num	ber of proposals approved	Total budget, Years 1-3	T bu Y
	1	51	11 (22%)	10	Nov 2007	5:	(1 HIV, 1 TB, 3 malaria)	\$130m.	
	2	31	11 (36%)	10 ¹	Apr 2008	6:	(3 HIV, 1 TB, 2 malaria)	\$365m.	
	3	18	8 (45%)	7	July 2008	3+5 ² :	(4 HIV, 1 TB, 3 malaria)	\$513m.	. \$^
	4	22	8 (36%)	8	Oct 2008	3+2 ³ :	(2 HIV, 2 TB, 1 malaria)	\$229m.	
	5	17	8 (47%)	6	Mar 2009	3+3 ⁴ :	(2 HIV, 2 TB, 2 malaria)	\$322m.	
	6	24	10 (42%)	10 ¹	May 2009	5+4 ⁵	(5 HIV, 3 TB, 1 malaria)	\$263m.	
	Total	163	56 (34%)	51		39:	(17 HIV, 10 TB, 12 malaria)	\$1,822m.	. \$3

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

Table 2: Wave 6 RCC results by country

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.

Country	Board Decision	Component	Upper ceiling budget: First 3 Years	Upper ceiling bu
Bangladesh*	Approved: Cat. 2	HIV	\$28,695,871	\$81,3
Belarus	Approved: Cat. 2	HIV	\$8,391,815	\$14,3
Georgia*	Approved: Cat. 2	HIV	\$18,449,677	\$43,9
Guatemala	Not approved: Cat. 3A	HIV	\$45,146,917	\$128,6
Guyana	Approved: Cat. 2	HIV	\$20,390,136	\$47,0
Guyana	Not approved: Cat. 3A	Malaria	\$1,613,137	\$3,1
India*	Approved: Cat. 2	HIV	\$155,665,328	\$302,0
Madagascar	Not approved: Cat. 4	Malaria	\$6,763,046	\$6,7
Nicaragua**	Not approved: Cat. 3B	Malaria	\$6,459,408	\$10,1
Nepal*	Approved: Cat. 2	Malaria	\$16,411,665	\$31,9
Paraguay	Approved: Cat. 2	ТВ	\$2,246,500	\$5,4
Russia***	Approved: Cat. 2	ТВ	\$6,538,435	\$12,2
Rwanda	Approved: Cat. 2	ТВ	\$6,464,070	\$13,7
Serbia	Not approved: Cat. 3A	ТВ	\$2,322,590	\$4,0
Tanzania	Not approved: Cat. 3A	HIV	\$87,375,447	\$179,5

^{*} Not approved in Wave 4, but approved upon re-submission in Wave 6

^{**} Not approved in Wave 4, and not approved again upon re-submission in Wave 6

*** Application was from a Sub-CCM

Unlike Wave 5, none of the TRP recommendations for approval were conditional on the removal of a limited set of specific elements. As it did for several proposals in Wave 5, the TRP requested that the Secretariat obtain an independent financial review of the funding request for one Wave 6 proposal, as part of the clarification process. The TRP said that the process of independent financial reviews should be extended more widely – i.e., not only for very large budgets, but also for more complex cases or where some costs prove difficult to interpret.

In a report on Wave 6 prepared jointly with the Global Fund Secretariat for the Global Fund Board, the TRP said that the overall quality of the performance frameworks presented in Wave 6 proposals was poor. It said that "M&E capacity is still weak and predominantly dependent on process rather than outcome and impact indicators. Given that the qualification of grants invited to submit an RCC proposal depends on demonstrated evidence (or demonstrated potential) for impact, countries should be provided with more robust M&E outcome indicators... [U]ntil M&E indicators are refined, the selection of countries for the RCC funding window remains questionable."

The TRP said that, as with the previous RCC Waves, assessing the additionality of funding requests has been challenging. The TRP says the problem may be becoming more acute now that eight rounds of funding (under the rounds-based funding stream) and five waves of RCC funding have been completed. The TRP said that "[l]inking on-going grants to the RCC proposal frequently does not provide sufficient information to assess whether amounts requested will be truly additional or duplicative." The TRP added that since the current proposal form "does not adequately address this issue," it hopes that applicants will used the new template available on the Global Fund website to clearly demonstrate the links between existing grants and the new proposals. The template is available at www.theglobalfund.org/en/rounds/9 (click on "Optional Linkages Template").

In addition, the TRP said that it "continues to note that lessons learned and experience gained from previous or on-going activities is not well incorporated into proposals and that the explanations for new interventions is often not clearly articulated."

Noting that only one of the Wave 6 proposals included measures related to grant consolidation, the TRP said that it "continues to advocate for grant consolidation," and it recommended (a) that clear guidance be provided to applicants on how best to present a consolidated proposal; and (b) that the proposal form be adapted to allow for this.

The TRP made the following additional observations:

- Proposal quality. The overall quality of proposals received was below expectations. In a few cases, proposals were incomplete and appeared to have been prepared under very tight timelines.
- Technical assistance. Some of the weak proposals came from applicants with a history of successful proposals in recent funding windows, which raises questions about the quality of technical assistance received in writing RCC proposals.
- Latin America and Caribbean (LAC). Proposals received from the LAC region continue to fall short in quality. The overall success rate of proposals from this region in the first eight rounds of funding (under the rounds-based channel) was 37 percent. In the RCC stream to date, this region's success rate has been 48 percent. Further investigation should be undertaken concerning why proposals from this region have been so unsuccessful.
- Health systems strengthening (HSS). As was the case in the two previous waves, none of the Wave 6 applicants included a separate request for HSS cross-cutting interventions.

Gender.As in previous waves, the TRP deemed this wave of proposals to be gender neutral. The
panel did not observe many specific requests to support gender-sensitive interventions, other than
standard targeting of pregnant women, female sex workers and sexual minorities as vulnerable
populations.

Finally, the TRP identified key strengths and weaknesses of the Wave 6 proposals. The lists of strengths and weaknesses are for the most part similar to those the TRP identified in Wave 5. GFO reported on the results of Wave 5 in Issue #103, available at www.aidspan.org/gfo.

The "Report of the Technical Review Panel and the Secretariat on Funding Recommendations for Wave 6 Rolling Continuation Channel Proposals" is available (in English only) at www.theglobalfund.org/en/trp/reports.

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