

Minutes
of the Country coordination Mechanism on National HIV/AIDS/STI Prophylaxis and control and National TB control Programmes (TB/AIDS CCM)

Date: 17.02.2011, 4.00 p.m.

Location: Ministry of Health, conference room

Agenda

1. Sustaining the national HIV/AIDS/STI Prophylaxis and Control and TB control Programmes through the implementation of Global Fund grants.

Progress report of the Principal Recipients of Global Fund

Rapporteur: **Victor VOLOVEI**, Director executive, PCU(15 min)

Andrei MOȘNEAGA, Director executive, PAS centre (10 min)

2. Presentation of the National strategy application interest folder to Global Fund in TB field

Rapporteur: **Victor BOTNARU**, Director IMSP Institute of Phtisiopneumology, „Chiril Draganiuc”, Director of the National Programme (7 min)

3. Presentation of the National strategy application interest folder to Global Fund in HIV/AIDS field

Rapporteur: **Ștefan GHEORGHITĂ**, Deputy Director of the National Centre of Public Health, National Coordinator of HIV/AIDS Programme (10 min)

4. Information related to the CCM Technical Working groups and the draft of the Operational Manual

Rapporteur: **Oleg BARBĂ**, TB/AIDS Screening Policy Consultant, TB/AIDS CCM (5 min)

5. Miscellaneous

Participants :

CCM members according to the Government Decision 375 from May, 6th

1. Viorel Soltan, CCM member, Vice minister of Health;
2. Tatiana POTÎNG, CCM Vice chair, Vice minister of Education;
3. Igor CHILCEVSCHI, CCM Vice chair, League of PLWHA;
4. Oleg ȚULEA, Vice minister of Youth and Sports;
5. Marina Semeniuc, Representative of Ministry of Finance;
6. Ilona Burduja, Representative of Ministry of Justice;
7. Nelea Prodan, Representative of Ministry of Internal Affairs;
8. Lilia Pascal, Representative of Ministry of Labour, Social Protection and Family;
9. Ștefan GHEORGHITĂ, Coordinator of National HIV/AIDS Programme;
10. Victor VOLOVEI, Director Executive, PCU;
11. Svetlana Stefanet, Representative of UNICEF;
12. Jarno HABICHT, The Chief of WHO Bureau in Moldova;
13. Gabriela IONAȘCU, Coordinator of UNAIDS in Moldova;
14. Alexandrina Iovita, Representative of UNDP;
15. Irina Guban, representative of World Banc;
16. Boris GÂLCĂ, Coordinator UNFPA in Moldova;
17. Diana CAZACU, Programme Manager, USAID;
18. Antonia FONARI, Chair of AIDS Network;
19. Liliana Gherman, representative of Soros-Moldova Foundation;
20. Andrei MOȘNEAGA, Director, PAS Centre;
21. Alexandru CURAȘOV, Director CRPC;
22. Ala IAȚCO, Chair of Union of organizations working in harm reduction;
23. Alexandru GONCEAR, Coordinator HIV/SIDA in Eastern region, Tiraspol;

24. Petru DERMENJÎ, Coordinator TB Programme, in Eastern region, Bender;
25. Eugeniu Padure, Christian AID, Moldova;
26. Anastasia Danilova, Director Executive, Information Center „GenderDocM”;

Invited persons:

1. Aliona Serbulenco, MoH;
2. Valeriu Sava, MoH;
3. Diana Doroş, MMPSF;
4. Galina Gavriliță, MoE;
5. Oleg Barba, CNMS;
6. Valeriu Pleşca; CNMS;
7. Iurii Osoianu, AIDS Centre;
8. Silviu Ciobanu, WHO;
9. Prodan Nelea, MIA;
10. Mihai Oprea, DRN;
11. Svetlana Doltu, DPI;
12. Victor Botnaru, Director IMSP IFP „Chiril Draganiuc”;
13. Constantin Iavorschi, PNT;
14. Liliana Domente, PNT;
15. Vitalie Slobozian, FSM;
16. Inga Binzari, AO „Carlux”;
17. Viorelia Guțu, PriceWaterHouse Coopers;
18. Angela Alexeiciuc, CRS;
19. Otilia Sîrbu, Director „Caritas Moldova”;
20. Victor Burinschi, PCU;
21. Valeriu Crudu, Centrul PAS;
22. Liliana Caraulan, PAS Centre;
23. Victoria Tataru, PAS Centre;
24. Veaceslav Mulear, GenderDocM;
25. Regina Povar, AIDS Centre,
26. Ecaterina Busuioc, AIDS Centre,
27. Silvia Stratulat, AIDS Centre;
28. Luminita Radu, UORN;
29. Svetlana Popovici; AIDS Centre;
30. Silvia Munteanu, AFEW;
31. Satohin Veaceslav, League of PLWHA;
32. Vieru Rodica, League of PLWHA;
33. Angela Capcelea UNICEF;
34. Ana Ciobanu, CNMS,
35. Tatiana Cotelea, CNMS;
36. Svetlana Plamadeala, Secretariat CNC TB/SIDA;

Discussions

Viorel Soltan, Chair of the meeting, in his opening speech referred to the agenda.

Victor Volovei in his presentation made a general presentation of Global Fund, as an mechanism to increase access to the treatment and prophylaxis of HIV/AIDS, TB and Malaria, covering the all people in need health expectations. It is a financial instrument and it does not implement directly the programmes, it mainly sustains the programmes, plans and priorities of the three diseases. The principles of Global Fund were listed. Referring to the grants implemented by PCU in TB field, Victor Volovei, mentioned the I round (Mai, 1st – April, 30, 2008) – 11,7 mln. \$ USA (5,05 mln. TB / 6,35 mln. HIV); Round 6 TB (October, 01, 2007 – September, 30, 2010)– 7,44 mln. \$ USA; Round 8 TB (October 01, 2009 – September, 30 2010)

- 2,21 mln. EURO; SSF TB (October, 01 2010 – December, 31, 2012– 5,73 mln. EURO. For the HIV/AIDS field, PCU managed the following grants: Round 1 (Mai, 01, 2003 –April, 30, 2008) – 11,7 mln. \$ USA (5,05 mln. TB / 6,35 mln. HIV); Round 6 HIV (January, 01, 2008 –March, 31, 2010)– 6,73 mln. \$ USA, SSF HIV (April, 01, 2010 –December 31, 2012)– 9,83 mln. \$ USA. The goal of TB investments was to sustain the National TB control and Prophylaxis programmes for the periods (2001-2005, 2006-2010 and 2011-2015). The objectives to achieve were defined as to stop TB epidemic by controlling the situation, to reduce TB burden and to reduce TB mortality.

The strategic directions are DOTS programme strengthening through detection improvement and ensuring an efficient case management; improving the DR-TB case management by ensuring the universal access to DR-TB diagnosis and treatment; strengthening the management and coordination of national assistance system for the TB patients; population education and stigma reduction; procurement of the medical equipment for the National reference, regional reference laboratories and microscopy centers, radiological fix and mobile equipment, procurement of lab consumables and reagents, co-financing the renovation works of the TB hospital from Vorniceni, construction of MDR-TB unit in Bender TB hospital, installing the ventilation in Penitentiary Institution N3 Tiraspol, procurement of I-line, II-line TB drugs, as well as drugs for adverse effects of MDRTB drugs. The investments were also done for the support of TB patients in DOTS treatment in the continuous phase (2003-2006), of MDR-TB patients in DOTS plus treatment in the period (2008-2009), support of ex-inmates who are continuing the treatment in civil sector (starting with 2010). The activities were also focused on capacity building of the NTP staff; as for M&E the financial resources were focused to sustain SIME-TB data base, support of NTP doing the monitoring visits in territories, support for the implementation of operational studies in different aspects of TB control, support for the information, education, and communication activities for the general population.

The main goal of investments in HIV/AIDS/STI field is related to the support of the National Prophylaxis and Control Programme for the periods 200-2005, 2006-2010, 2011-2015. The main strategic directions in HIV/AIDS control field are: scaling up HIV/AIDS prevention, treatment and care services, ensuring universal access to antiretroviral treatment, strengthening the voluntary counseling and testing, sustaining the prevention activities in vulnerable groups, improving capacities of the Government and community to face the HIV/AIDS epidemic through creating and fortifying the partnerships. The infrastructure was sustained by making procurements of the medical equipment: ELISA stations, PCR, CD4/CD8 etc), procurement of lab consumables and reagents, units of transport for HIV/AIDS centre in Chisinau and Tiraspol, regional treatment centers. Another strategic direction is related to the ARV treatment, opportunistic infections, methadone for IDUs as well as social support for HIV/AIDS patients. The prevention activities were directed to harm reduction in vulnerable groups: IDUs, FSW, MSM, migrants and prisoners, prevention among youth (Life skills based education, peer education), Information, education, communication activities. The staff was trained, M&E developed and ensured.

The main important lesson learnt was that these interventions are very important and depends of equipment, reagents, consumables, drugs, but the most important factor is the human one.

Mr Volovei referred to several problems the PR is facing:

1. identifying the place for the Coordination Unit of the national HIV/AIDS programme (around 50 000 \$ are blocked), maintaining the equipment by the medical institutions, implementation of Life skills based education curriculum.

The second major subject covered by Mr. Volovei was related to the extended CCM application for the period 2011-2012. He informed that initially CCM, Secretariat and technical working groups were sustained from grants, starting with 2010 the CCM is sustained from special resources, from 2011, it is possible to apply in an extended way, meaning to cover a period of 2 years. The main requirements for the extended funding are:

- the application should be based on a strategic planning process,

- the strategic plan must be elaborated in a transparent, participatory and involving all CCM members
- the plan is recognized and approved by all CCM members and respects the activity plan for the 2 years

The strategic plan workshop was organized during 22 to 23 of October 2010. At the workshop 35 persons participated, representing governmental, civil society, private and international agencies sectors.

The application was sent to CCM members before the meeting for analyses.

Thus the total budget for year 1 is of **48320 \$ USA**, **the total budget for the second year is of 50920 \$ USA**, **the total sum for two years is of 99 240 \$ USA**.

Tatiana Poting informed the participants that actually the health education is part of the Civic education curriculum, which also compounds ecological education, life skills, etc..

Viorel Soltan organized the vote procedure for the application for CCM funding for the period 2011-2012. Unanimously, the application was approved by all CCM members.

Andrei Mosneaga presented the progress report on the grants implemented by PAS centre.

For HIV control, Pas is managing the following grants:

- for 5 years (total): EUR 15,800,754
- for Phase I (2 years, approved): EUR 7,102,866
- Implemented at the moment: EUR 2,811,230

TB control:

- Consolidated grant R8 and R9: **“Empowering the patients and community in TB control in Moldova”**
 - for 5 years (total): EUR 8,576,859
 - for phase I (2 years, approved): EUR 4,083,350
 - Implemented at the moment: EUR 499.165

Describing, the grant from round 8, it was mentioned that the grant was launched in January, the 1st of October. The goal is to reduce the HIV mortality, morbidity and impact for the HIV infected and affected people. It has the following components:

1. improving the round 6 performance through infrastructure development;
2. Improving PLWHA quality of life;
3. capacity building for the league of PLWHA
4. Planning and administration

The grant is implemented through the following sub-recipients: League of PLWHA, Soros-Moldova Foundation, NGO „New Life”, The Institute for Human Rights.

The following achievements were listed:

- Review of the curriculum in HIV/AIDS field for the initial and continuing training of medical workers, continuing training for the social workers and of jurists
- Improving the HIV/AIDS knowledge and capacity building for the specialists from medical, social, law, as well as multidisciplinary teams, League of PLWHA, NGOs involved in providing care and support services to the families of PLWHA.
- Establishment of palliative care unit for the AIDS patients;
- Institutional capacity building to provide social services for PLWHA;
- Establishment of social regional centers for HIV infected and affected people;
- Providing care and support services for HIV affected people through League of PLWHA;
- Social support for PLWHA through the League of PLWHA (4 regional organizations)
- Juridical assistance for PLWHA and solving cases related to the rights of PLWHA;
- Support to IDUs to increase their adherence to substitution therapy treatment and the quality of life of IDUs;

TB consolidated grant (R8+R9) was launched October, 1st, 2009.

The goal of the grant is to scale up the community and civil society efforts in TB control in Moldova

Programme Components:

1. Mobilizing resources to sustain partnerships at the level of community;
2. Avoiding barriers for the poor persons and vulnerable communities to access health services;
3. Strengthening the health system and attracting new partners in TB Control
4. Communication, advocacy and social mobilization programmes
5. Integrating the TB control activities in penitentiary sector
6. Ensuring the universal access to diagnosis and treatment for MDR-TB patients
7. Operational research in TB treatment and adherence to treatment for TB patients
8. Planning and administration

The grant is implemented through the following sub-recipients: Institute of Phtisyopeumolgy „Chiril Draganiuc”, Soros-Moldova Foundation and „Carlux“.

The following achievements were listed:

- *- Technical assistance to strengthen the activities of the support for the MDR-TB patients*
- *Sustaining for the adherence to treatment: creation of 40 groups on counseling of TB patients, patient education and counseling sessions (120 sessions provided), informational and educational materials elaborated and distributed; food packages for MDR TB patients.*
- *Training for health workers for Tb services staff (19 specialists)*
- *Local training in DR-TB management for the TB service from outpatient phase (117 specialists formed)*
- *Training for primary health doctors in DR-TB management (20 trainings - 264 family doctors and 282 medical nurses trained)*
- *Trainings for M&E indicators, training for Tb specialists related to TB infection control.*

The following problems were presented by **Mr. Mosneaga**: a long term for the negotiations with Global Fund on consolidated grants, the project on the regional social centre from south – Comrat was not approved by the Public Health Authority from Comrat, TB and HIV: Communication problems / it become difficult to work with Global Fund due to global corruption problems.

Victor Botnaru presented the intention of Republic of Moldova to apply to Global Fund per TB National Strategy.

He firstly referred to problems related to TB control in Moldova:

- High TB incidence
- Increase of number of MDR-TB patients
- The low treatment success rate
- Low adherence to treatment
- DOT only of 60-65% in the treatment in outpatient phase
- The lack of efficient social support networks
- Insufficiency of specialized staff in TB control
- Migration of population

The main TB indicators are:

Global incidence - 4631 (113,20/0000)

Mortality - 727 (17,80/0000)

MDR TB prevalence among new cases - 25,7 %

Treatment success rate - 54,6%

The National TB Programme for the period 2011-2015 approved through Government Decision nr 1171 from December, 21st, 2010 was elaborated with the support of Governmental sector, NGOs and civil society and international partners. The main goal of the programme is to improve the health population by reducing the TB burden in Moldova.

The TB programme lists 7 general objectives:

1. Ensuring qualitative diagnosis, by obtaining a rate of about 70% of pulmonary TB detection of positive microscopy (9 activities are planned)
2. Ensuring the universal access to TB treatment, by obtaining a treatment success rate of 78% among new positive cases and MDR TB not less than 60%. (6 activities are planned)
3. Ensuring social support for at least 90% of patients from vulnerable groups through partnership development at the community level (5 activities are planned)
4. Ensuring the efficient control of TB/HIV co infection by reducing the rate of TB/HIV co infection among Tb cases under (4 activities are planned)
5. Improving the knowledge level of Tb among general population at a level of not less than 80% and maintaining the rate of BCG vaccination at birth at least at the re rate of 98% (5 activities are planned)
6. Development and application of the results of scientific research and operational research in TB control through the realization of at least 7 researches(2 activities are planned)
7. Improving the management, coordination, M&E system(5 activities are planned)

Financing of the programme

	Total 2011 - 2015				
	Costs	Internal estimated financing		Foreign assistance estimated	Potential future projects
		Obligatory health insurance	State budget		
Objective 1	369.145,8	196.534,6	3.581,1	25.235,0	143.795,2
Objective 2	1.245.266,1	644.090,9	144631,0	111.083,3	345.461,0
Objective 3	127.637,5	10.632,7	0,0	94.913,0	22.091,8
Objective 4	5.829,1	0,0	0,0	3.045,2	2.783,9
Objective 5	32.987,9	6.400,0	0,0	11.286,6	15.301,3
Objective 6	3.968,0	384,0	0,0	3.054,1	529,9
Objective 7	24.831,6	3.123,1	0,0	11.259,4	10.449,1
SUB-TOTAL	1.809.666,0	861.165,3	148212,0	259.876,5	540.412,2
Adjusted costs by 10% yearly, starting with 2012	148.118,1				50.365,1
TOTAL	1.957.784,2	861.165,3	148212,0 *	259.876,5	688.530,4

The NSA TB application followed the principles:

- Ensuring consecutive programme
- Capacity building Scale up of multi-stakeholder involvement
- Coordination of activities in the programme implementation
- National financial funding is available and the needs of the foreign financial assistance adjusted to the national Programme and the results estimated
- M&E

Requirements to the application

- NP does not end till June 2015
- 2. The following package of documents is presented:
 - NP
 - Situational analyses and the epidemiological situation
 - Budget
 - Plan and M&E system
 - Activity plan to implement the NP detailed budget for years 2011-2015
 - The final evaluation report of the NP and the description of the elaboration process of the NP for PN 2011-2015
 - The final year report and report for 2 years
 - National Strategy on Health system development 2008-2015
 - National Health Policy 2007-2021
 - Legislative and normative acts in the field
 - Operational plans

Documents being submitted (title, author, dates)

- 1. *Moldova_TB_Annex1_CCM_meeting_minutes*
- 2. *Moldova_TB_Annex2_proces_of_development_NTP*
- 3. *Moldova_TB_Annex3_National_TB_Programme_2011-1015(NTP)*
- 4. *Moldova_TB_Annex4_NTP_budeget_2011-2015_detailed*
- 5. *Moldova_TB_Annex5_Report_WHO_2010*
- 6. *Moldova_TB_Annex6_M&E_Plan*
- 7. *Moldova_TB_Annex7_M&E_Plan_targets*
- 8. *Moldova_TB_Annex8_Annual_Plan_2011*
- 9. *Moldova_TB_Annex9_Annual_Plan_2012*
- 10. *Moldova_TB_Annex10_Programme_Review*
- 11. *Moldova_TB_Annex11_Case_Study_Moldova*
- 12. *Moldova_TB_Annex12_The_Second_MDG_Report*
- 13. *Moldova_TB_Annex13_End_of_Report_CFATM_GRANT:MOL-102-G01-C-00*
- 14. *Moldova_TB_Annex14_National_Health_Policy_2007-2021*
- 15. *Moldova_TB_Annex15_Healthcare_System_Development_Strategy_2008_2017*
- 16. *Moldova_TB_Annex16_The_strategy_of_primary_health_care_development_in_Moldova*
- 17. *Moldova_TB_Annex17_Medium_Term_Expenditure_Framework_2009-2011*
- 18. *Moldova_TB_Annex18_Закон_о_контроле_и_профилактике_туберкулеза*
- 19. *Moldova_TB_Annex19_Law_National_Development_Strategy_2008-2011*
- 20. *Moldova_TB_Annex20_Economic_Stabilization_and_Recovery_Program_2009-2011*

Stefan Gheorghita presented the intention of Republic of Moldova to apply to Global Fund per HIV/AIDS National Strategy

- On the 1st of January 2011 the cumulative number of HIV infected persons was of **6404**, including **2041** – in Eastern regions
- The HIV prevalence at January, 1st, 2011 was of **155,94** cases, **378,59** at 100 hundred thousands in Eastern region

The national HIV/AIDS/STI prevention and control programme for the period 2011-2015, approved through the Government decision nr 1143 from 16.12.2010 was elaborated by the Governmental sector, NGOs and civil society, international organizations as UNAIDS, WHO, UNDP, UNICEF, UNFPA, WB, USAID. The programme was coordinated with the available Global Fund grants, including round 9 and other donors.

The goal of the programme is to maintain the epidemic situation in the limits of a concentrated epidemic and reduction of population vulnerability to HIV/AIDS and minimizing the consequences. The objectives of the programme are:

Objective 1. Maintaining HIV/AIDS infection in the population age group of 0-39 years at the level of 20 cases at 100 thousands

Objective 2. Reducing by 10 % to 2015 the mortality of HIV persons from the total number of estimated persons

The main strategic directions:

- Ensuring the access of at least 10% of general population to preventive services, including condoms
- Ensuring access to 60% of the population at the high risk of infection to prevention services
- Ensuring the STI treatment of 80% from patients
- Ensuring the access to 95% from HIV pregnant women to mother to child prevention services
- Ensuring the blood security of 100%
- Ensuring the access to post exposure prophylaxis of 100% when addressing
- Ensuring the ARV treatment to 80% of patients from the estimated number of the HIV/AIDS persons who need the treatment
- Ensuring the care and support services to at least 10% from the estimated number of HIV/AIDS persons
- Creation of an efficient system of management of the programme

Mr. Gheorghita presented the budget per objective. The total budget of the Programme is of – **83,800,666 \$, covered by public sector – 16,717,662\$, from approved grants -13,272,435\$, the deficit is of – 53,810,569\$**

The application principles were:

- Ensuring consecutive programme
- Capacity building Scale up of multi-stakeholder involvement
- Coordination of activities in the programme implementation
- National financial funding is available and the needs of the foreign financial assistance adjusted to the national Programme and the results estimated
- M&E

At the first application phase the following steps are done:

The following package of documents is presented:

- NP
- Situational analyses and the epidemiological situation
- Budget
- Plan and M&E system
- Activity plan to implement the NP detailed budget for years 2011-2015
- The final evaluation report of the NP and the description of the elaboration process of the NP for PN 2011-2015
- The final year report and report for 2 years
- National Strategy oh Health system development 2008-2015
- National Health Policy 2007-2021
- Legislative and normative acts in the field
- Operational plans
- Institutionalizing by CCM a Coordination Unit (CCM) and nominating a person as a coordinator to realize the common evaluation of the NHP
- Presenting the interest till the 23rd of February, 2011, 5.00 p.m. (The request of the express of interest for the National strategy application, the CCM minutes related to the application decision, the whole package of documents in the hard and electronic formats with the established periods to realize the common evaluation (8-12 days during: 11.07 - 25.07 -; 8.08 -; 22.08 -; 5.09 -)

The phase I is ended when the Global Funds invites the participant countries to apply according to NSA modality - 31.03.2011

Requests to the application:

- Elaboration of the agenda and programme on the realization of the common evaluation for the period 11.07-23.07.2011
- Realizing the evaluation of the national programme in common with the local and foreign experts
- Elaboration of the draft report of the common evaluation of the National HIV Programme and presenting it at the CCM to all relevant stakeholders
- Finishing the report
- Based on this report, CCM will take the decision either to apply or not

The following phase, in case CCM decides to continue applying per National Programme needs to follow the steps:

- to fill in the NSA form, containing>
- the budget requested from GF with the financial information related to the application;
- Principal recipient selected and information related to selection procedure;
- CCM participation at the elaboration process and approval of the request

2. Report related to the common evaluation

Deadline: December, 15, 2011

The Global Fund evaluates the application till the second quarter of 2012 and offers an answer. Actually, Moldova made the appeal for the Xround and is waiting for the answer from Global Fund.

In this context, the following scenarios were presented:

Round X the appeal presented to GF. It may be accepted or not.

NSA Application may be accepted or not

In case the CCM decides not to apply per NSA it **can apply per round XI**

Oleg Barba referred to the Draft of the CCM Operational Manual (a rules and procedures rulebook) that needs to be discussed, improved, approved and followed.

The need of and OM is based on:

- Establishment of clear, exact act coordination, management and information within the CCM and its technical working groups
- Elaboration of monitoring the decisions' implementation tool for central and operational levels within CCM
- Establishment of clear rules to facilitate the applying, supervision procedures of GF grants' implementation and of other donors

The OM contains:

- Goal and objectives
- Formal CCM mandate
 - Political commitment
 - Intersectorial structure formed through the Government decision
 - Has the role to elaborate, align, supervise and monitor the policies in TB and

HIV/AIDS control fields

- Working principles
- CCM functions
- CCM structure
 - Decisional level (selection procedure, terms of reference, functions)
 - Coordination level (terms of reference, functions)
 - National Experts committee
 - Operational level (selection procedure, terms of reference, the decision elaboration and implementation etc..)

Oleg Barba presented the working plan for 2011 for the CCM:

Activity	Quarter I	Quarter II	Quarter III	Quarter IV
Strengthening the supervision of grants implementation by PR				
CCM meetings	X	X	X	X
Site visits		X	X	
TWG revision	X			
Discussion and approval of the OM	X	X		
Ensuring the application procedures to GF	Permanent			
Improving the constituencies involvement with the accent on private sector				
Elaboration and approval of the communication strategy for the CCM		X		
Strategy implementation (web pages, information bulletin)	X	X	X	X
Organizing 2 working shops with private sector		X		X
CCM capacity building (CCM role and supervision)				
Needs assessment		X		
Elaboration of the training plan			X	
Organization of the 1st training course				X

Viorel Soltan organized the procedure of voting for NSA for TB field.

It was approved unanimously by all CCM members

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CCM Decisions:

The Draft of the CCM decision was read:

1. CCM assumes the information presented by the Principal Recipients (Mr. V. Volovei) and PAS Centre (Mr. A. Moşneaga) related to the progress report on the implementation of Global Fund grants aimed to sustain the National HIV/AIDS/STI prophylaxis and control and National TB control Programmes.

2. CCM approves:

- The extended funding application of Country Coordination Mechanism for the period 2011-2012;

- The expression of interest of the Republic of Moldova for National Strategy Application for TB field;

- The expression of interest of the Republic of Moldova for National strategy application for HIV/AIDS/STI field.

3. The National Programmes Coordinators (Mr V. Botnaru and Mr. Șt. Gheorghită) with the support of UNAIDS and WHO Bureau in Moldova and Principal Recipients will ensure the presentation to the CCM Secretariat of the whole set of documents required and needed to be presented to Global Fund by February, 21st, 2011. The procedure will be provided in coordination with the CCM Chair.

4. The Principal Recipient - Public Institution "Coordination, Implementation and Monitoring Unit of the Health System Restructuring Project" (IP UCIMP RSS) – Mr. Victor Volovei together with the CCM Secretariat ensure the application submission procedure is organized and the deadline – February, 23rd is respected.

5. Technical Working groups during a month:

- will organize meetings to revise their composition and present the results to the CCM Secretariat,

- will analyze and comment on the Draft of the CCM Operational Manual.

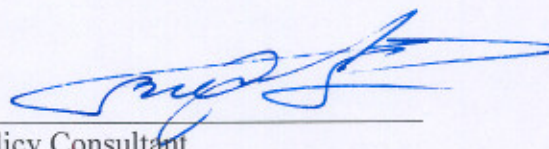
6. CCM Secretariat and the Technical Working Group „Education and youth” will prepare an information related to the implementation of “Life skills based education” curriculum for next CCM meeting.

CCM members approved the Decision unanimously.

CCM meeting Chair
Vice Minister of Health
Viorel SOLTAN



Secretary of the meeting:
Oleg BARBA
CCM TB/AIDS Screening Policy Consultant



Date: 21st of February 2011