Kenya Joint TB/HIV Concept Note Development
National TB Program Experience

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National TB Program
Ministry of Health
Outline

- TB situation in Kenya
- Country dialogue process
- National strategic plan
- The concept notes
- Priority Modules/ Interventions
- Funding decisions/ In country approvals
- Grant making process and timelines
- Key experiences/ best practices
<table>
<thead>
<tr>
<th><strong>Population (2014)</strong></th>
<th>45 Million</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incidence rate</strong></td>
<td>246/100,000</td>
</tr>
<tr>
<td><strong>TB Case Detection Rate</strong></td>
<td>81%</td>
</tr>
<tr>
<td><strong>Incidence of TB</strong></td>
<td>89,249</td>
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<tr>
<td><strong>Case Notification Rate</strong></td>
<td>196/100,000</td>
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<tr>
<td><strong>HIV prevalence (KAIS 2012)</strong></td>
<td>5.6 %</td>
</tr>
<tr>
<td><strong>Estimated TB Prevalence rate</strong></td>
<td>266/100,000</td>
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<tr>
<td><strong>TB Mortality</strong></td>
<td>15%</td>
</tr>
<tr>
<td><strong>TB treatment sites</strong></td>
<td>3320</td>
</tr>
<tr>
<td><strong>Xpert MTB/ RIF diagnostic sites</strong></td>
<td>120</td>
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</table>
Stakeholder Engagement

All inclusive country dialogue identifying

- real needs
- barriers to service (using evidence)
- key modules and interventions that need to be scaled up
- Key players identified
- Key populations and civil society involvement

Beyond the CCM
All stakeholders involvement including civil society & key populations to help improve quality of the Concept note

Inclusive process of all stakeholders and development of strategies
Collect/provide data

Using evidence, help identify barriers to services, and good programs that should be scaled up

All stakeholders including Key populations participate in drafting concept note to ensure interventions will achieve impact
Identify the detailed activities necessary to achieve impact
Identify implementers most appropriate to deliver the activities and ensure impact

Ongoing Country Dialogue

National Strategic Plan determined by country
Concept Note
Grant-Making
2nd GAC Board
Grant Implementation 2.5 years
Country dialogue as an inclusive, on-going process

Country Dialogue

The term used by the Global Fund to refer to the ongoing discussion that occurs at country level to prioritize how to fight the three diseases and strengthen health and community systems.

Who plays a role in country dialogue?

Academia

Country government

Global Fund

Other donors

Private sector

Technical partners

Civil society/key populations

These actors meet in the CCM, however, the dialogue should expand beyond the CCM.
The Actors

- Ministry Finance, Health
- KCM, LFA, GF CT
- CDC, USAID, WHO, UNAIDS, UNICEF, PEPFAR, CHAI, DFID-Futures
- NACC, KRC, AMREF, KANCO
- Civil Societies – NEPHAK, KELIN, CLAC
- Key Population – MSM, FSW
- Private sector – KAPTLD, LVCT
- Academia - KEMRI
The National Strategic Plans

- Kenya Tuberculosis National Strategic Plans 2015-2018
The Concept Note

- Inputs from country dialogue collected and made into a concept note, specifically
  - Epidemiological data
  - Disease contexts
  - Priority interventions agreed
  - Full expression demand
  - Concept Note secretariat to lead the process
Key Processes in CN Development

1. Completion of final draft
2. Internal Peer Review
3. External Peer Review
4. Finalization

Submitted on 29th January 2015
TRP reviewed from 18th-27th March, Awaiting GAC response
Prioritization of funding needs and choices of best response for highest impact

14 Modules Selected

HIV
- Prevention Gen Pop
- Prevention FSW
- Prevention MSM
- Prevention PWID
- PMTCT
- HIV Treatment

TB
- & Treatment
- MDR-TB
- TB/HIV

HSS/CSS
- HMIS/M&E
- PSM
- Service Delivery
- CSS

Program Management
**Key Considerations**

- **Positioning the country’s prioritized funding request within the country context, funding landscape and aim towards achieving national targets**
  
  - Prioritization was evidence-based and built on analysis of the financial and programmatic gaps across the two programs as guided by the ICCs.
  
  - Prioritization of modules done within the realities of the country allocation.
  
  - Choices of the best interventions to achieve the highest impact with the investment.
  
  - Consideration for expected impact and outcome from additional investments above the country allocation.
## Grant Making Schedule

<table>
<thead>
<tr>
<th>Activity</th>
<th>Deadline</th>
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</thead>
<tbody>
<tr>
<td>Capacity assessment tool (CAT) submission</td>
<td>20 May 2015</td>
</tr>
<tr>
<td>GF Country Team Mission to initiate process</td>
<td>26 May – 3 June</td>
</tr>
<tr>
<td>Grant Making Retreat</td>
<td>8 June – 10 June</td>
</tr>
<tr>
<td>Submission of draft grant documents</td>
<td>10 June 2015</td>
</tr>
<tr>
<td>LFA review</td>
<td>11 June – 19 June</td>
</tr>
<tr>
<td>Another GF CT mission to finalise grant negotiation</td>
<td>22 June – 3 July</td>
</tr>
<tr>
<td>Final grant documents submission</td>
<td>3 July 2015</td>
</tr>
<tr>
<td>Grant signing</td>
<td>September 2015</td>
</tr>
<tr>
<td>Grant start date</td>
<td>1 October 2015</td>
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## Summary of Grants Signed - USD 332m

<table>
<thead>
<tr>
<th>PR</th>
<th>HIV</th>
<th>TB</th>
<th>Malaria</th>
</tr>
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<tbody>
<tr>
<td>National Treasury</td>
<td>160m</td>
<td>43m</td>
<td>54m</td>
</tr>
<tr>
<td>AMREF</td>
<td>0</td>
<td>23m</td>
<td>9m</td>
</tr>
<tr>
<td>Kenya Red Cross</td>
<td>37m</td>
<td>0</td>
<td>0</td>
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<tr>
<td>KANCO</td>
<td>6m</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>203m</strong></td>
<td><strong>66m</strong></td>
<td><strong>63m</strong></td>
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Grant Implementation

- 1st October 2015 – 31st Dec 2017
- Disbursement already received
Key Experiences

- Devolution
- Country dialogue
- Tight timeliness
- New Application process/ New Templates
- Training on application processes - GF
- Funding splits between PRs, Modules
- Cross cutting issues- implementation arrangements
Best Practices

- Communication Plan – newsletters, ICCs
- Engaged consultants
- Joint concept note secretariat
- NSP review processes
- Counterpart financing
- County dialogue meetings
- Development partners commitment
ASANTE SANA !