



**Bangladesh Country Coordinating Mechanism  
CCM Secretariat  
Ansari Bhaban, 14/2 Topkhana Road, Dhaka - 1000**

**Minutes of the 75<sup>th</sup> Meeting of Bangladesh Country Coordinating Mechanism (BCCM)**

Chairperson	:	Professor Dr AFM Ruhul Haque Honorable Minister, Ministry of Health and Family Welfare
Date	:	30 October, 2013, Wednesday
Time	:	03:00 hours
Venue	:	Conference Room (No-332), Ministry of Health and Family Welfare
Brief Report	:	Meeting minutes - Page (1-4) Participant list - Page (4-5)

At the outset, Professor Dr. AFM Ruhul Haque, Chairperson, Bangladesh CCM and Minister, Ministry of Health and Family Welfare welcomed all the members to the 75<sup>th</sup> CCM meeting. He noted that during last one year CCM meeting was not held due to absence of CCM Coordinator. CCM Secretariat was not activated also. Now newly appointed CCM Coordinator is already on board and CCM secretariat will be activated according to guidelines and meeting will be held regularly at some intervals. With the permission of Hon'ble Minister and CCM Chair, Md. Shafiqul Islam Laskar, Additional Secretary (PH&WHO) Ministry of Health and Family Welfare steered the meeting in accordance with predetermined agenda.

**AGENDA 1: Confirmation of proceedings of last meeting**

It was noted that the 74<sup>th</sup> CCM meeting was held on 13 September 2012 and hard copies of the minutes were electronically circulated to all. The minutes of last meeting was taken as read and confirmed.

**AGENDA 2: GSM Team diagnostic report for Strengthening CCM (USAID Technical Support)**

Starting from Round 2, Bangladesh has been awarded 17 grants with the total amount of USD 367,175,223 for all three diseases out of which USD 278,838,530 have been disbursed.

- Fifty three percent of funding has been for TB programs.
- Seven grants have been already closed, out of which five grants have been consolidated.
- Four grants are in closure and six grants are still in progress at different stages of implementation.
- Grants have been mostly graded as A/B1 with the exception of one HIV grant that was graded C (Ministry of Health is the PR) and is now in closure.

There are a number of PRs of the GF grants in Bangladesh, representing both Government of Bangladesh (Ministry of Health and Family Welfare, and Ministry of Finance) and civil society (Save the Children, Icdrr'b and BRAC).

OIG provided several recommendations for addressing BCCM eligibility and improving its functionality that were communicated to the BCCM at their debrief. Among other concerns the emphasis was on Conflict of Interest (COI) issues and the need to strengthen oversight role of the BCCM. BCCM acknowledges that it is expected to improve their performance of the ongoing grants. The team should explore which of these recommended actions have been already implemented.

The Grant Renewal (process for all three diseases) will be initiated from January 2014 under the New Funding Model. The "country dialogue process" will begin in January 2014 and will involve the CCM, Development partners, key constituencies, and the Global Fund.

To make Bangladesh eligible for new funding under this new funding model, the Global Fund is requiring that the applicants must meet six eligibility requirements. Several of these eligibility requirements will be subject to additional standards as well. The six requirements are as follows:

1. **Proposal Development:** Transparent & documented proposal development process including broad range of stakeholders;
2. **PR Selection:** Transparent, documented PR selection; management of COI
3. **Grant Oversight:** Oversight Plan submitted & implemented (3 new minimum standards)
4. **PLWD Membership:** Evidence of membership of people living with/affected by diseases (1 new minimum standard)
5. **CSO Elections:** CSO constituency member selection transparent, documented (3 new minimum standards)
6. **Conflict of Interest:** policy developed & applied (1 new minimum standard)

The objective of GMS is to support the CCM Bangladesh's (BCCM) compliance with the Global Fund **eligibility requirements** and fulfil its core **CCM functions and responsibilities**.

**GMS Team depicted their findings in the following way:**

**Grant performance:** Overall the grants are performing well, with ratings of A1, A2, and B2.

**Membership analysis:** This revealed potential conflicts of interest and a lack of documentation of the election process for membership. The number of BCCM meetings declined last year.

**Meeting participation:** The CCM has a total of 33 seats requiring 33 members elected / appointed to fill the seats but no alternate members was elected / appointed (which is normally recommended by GF). The average number attending meetings is 25 (76%). Often it was seen that substitutes attend representing member organization, rather than the constituency hence defeating the purpose of constituency representation.

**CCM structure:** The CCM consists of four Committees as Executive Committee, Oversight Committee, Conflict of Interest Committee and Technical Committees of HIV/AIDS, TB and Malaria. Out of these, only the technical disease committee is currently functional. The Oversight Committee meeting minutes show that it functioned like an Executive Committee and very few Oversight decisions were taken and further sent to the CCM for endorsement. There is no record of 6 monthly reports /PUDRs reviewed and also no record of an oversight visits undertaken on site.

**CCM functioning:** A general observation is that there is little application of Global Fund guidelines & procedures. Key affected populations (KAP) are not represented. No designated focal person for Technical Assistance or gender has been assigned.

**The New Funding Model** of the Global Fund will involve annual assessments of the performance of individual CCMs under the country dialogue process beginning from January 2014. This would be done with the CCM, development partners, key constituencies and the Global Fund. Access to future funding will depend on a healthy CCM and good governance patterns.

**GMS Proposed Recommendations are as follows:**

1. **Reconstitution of the BCCM according to GF guidelines, BCCM Governance Manual, and the BCCM Technical Review Committee Report**
2. **Authorization GMS team to prepare draft versions of BCCM "framework documents" for review by reconstituted CCM**
3. **Establishment an Executive Working Group to facilitate BCCM reform**
4. **Strengthening of BCCM Secretariat**

#### **AGENDA 3&4: CCM Reconstitution&Strengthening CCM Secretariat**

Long discussion was held on CCM reconstitutions and the diagnostic reports on CCM of GMS team. CCM decided that BCCM would be reconstituted by next January 2014 with the technical support of GMS. GMS team expressed their willingness to provide support to BCCM to reconstitute and strengthen in accordance with diagnostic findings and Abbas committee's recommendations, subject to CCM approval. CCM made an Executive Working Group Chaired by Secretary, Ministry of Health and Family Welfare & Vice Chair of BCCM. Members of Executive Working Group will be from UNAIDS, Save the Children, BRAC, USAID, WHO, Icdrr, Additional Secretary (PH&WHO) and CCM Coordinator would also be in the committee. CCM decided Executive Working Group would meet on 31<sup>st</sup> October 2013 with GMS team and would work out how to get support from GMS team to reconstitute CCM and strengthen CCM and CCM Secretariat.

Based on GMS presentation and GFATM eligibility requirement Hon'ble Minister Prof. Dr. AFM Ruhul Haque said GMS team should continue with CCM reconstitution and strengthen process as well as pointed out the areas where GMS team would work closely with Executive working Group. The areas to be covered by GMS team are as follows:

- A) **Frame work documents**
  - Revised Governance Manual
  - New CCM Oversight plan
  - Revised CCM Conflict of Interest policy and procedures
  - New Communications Plan
- B) **Restructure BCCM with permanent committees**
  - Executive Committee



- Grant Oversight Committee, CCM members and non-members (no PR/SR)
- Proposal Development Oversight Committee, CCM members and non-members (no PR/SR)
- Continue Technical Sub-Committees

**C) Strengthen grant oversight capabilities of BCCM**

- Establish CCM Committee (TOR)
- Approve Oversight Plan
- Appoint members from within and outside CCM

**AGENDA 5: CCM Budget 2013 approval**

CCM Budget for 2013 was placed at CCM. The draft budget was circulated to all CCM members. CCM members discussed on the process of CCM budget approval, verification and fund release. CCM decided to submit the budgets after developing work plan according to budget with the support of GMS team. GMS team suggested that if budget exceeds USD 50,000.00, it should be separated by two budgets. One is for up to USD 50,000.00 and another is for rest of money according to GFATM funding guidelines.

**AGENDA 6: Miscellaneous**


- Proposal Development:** GMS Team explained the proposal development process for GFATM grant. Proposal development should be done by CCM led process. It may be done by hiring consultant or by making small expert technical group from CCM member. Hon'ble Minister shared his thought that consultants could be hired to develop proposal for next round grant from GFATM. This is the easier way to meet this eligibility requirement for GFATM.
- Seat from PLWD:** Discussion was held on two memberships from the constituency of PLWD and its election process. Participant from PLWA explained the election process and its documentation for the membership of CCM.
- AVR for People with HIV/AIDS:** Discussion held on services related to HIV/AIDS positive people. Dr. Lima Rahman, Director HIV/AIDS explained the present situation of services and anti-viral (ART) drugs for HIV/AIDS positive people. Line director-NASP also gave explanation for temporary drugs problem.

**DECISIONS:**

After thread bare discussion, the following decisions were made at the meeting:

1. CCM approved and endorsed 74th CCM meeting minute (**Agenda 1**)
2. CCM decided to reconstitute and strengthen CCM according to GMS Team's diagnostic report and their recommendation on CCM Strengthening (**Agenda 2&3**)
3. Following extensive and participatory discussion CCM decided to continue GMS team technical support for BCCM for strengthening and forming an Executive Working Group comprising Secretary-MOHFW, UNAIDS, WHO, USAID, Save the Children, Iccdr'b, BRAC for working closely with GMS team on following issues:
  - Reconstitution of CCM according to updated governance manual and Recommendations of Abbas Committee
  - COI policy procedure
  - Grant oversight committee TOR
  - Oversight committee plan
  - Revised Governance manual and finalizations
  - Strengthening CCM Secretariat and documentation(**Agenda 3 &4**)
4. CCM decided that Technical Sub Committees would continue their meetings and activities. Chairperson of the respective technical sub committees will continue their stewardship role.
5. CCM decided that Technical Working Group of each disease will work on CCM led proposal for next round of GFATM grant. Consultants could be hired if needed. PRs and SRs will provide necessary support to the technical working groups and consultants for proposal writing (**Agenda 3&4**).
6. 1<sup>st</sup> meeting of Executive working Group and GMS team will be held on 31 October 2013 at 3.00pm (**Agenda 3&4**).
7. CCM approved the proposed budget for CCM Secretariat for the year of 2013 but it should be attached with a brief plan for CCM Secretariat and it would be in two separate budget one for USD 50000.00 and another one exceeding USD 50000.00 (**Agenda 5**).

As there is no other issue to discuss, Chairperson concluded the meeting by extending thanks to members of CCM for their support and participation in the discussion.



18/12/13

**Professor Dr AFM Ruhul Haque, MP**  
Minister for Ministry of Health and Family Welfare &  
Chairperson  
Bangladesh Country Coordinating Mechanism (BCCM)

**Participants Attendants :**

1. Dr. Prof. AFM Ruhul Haque, Honorable Minister, Ministry of Health and Family Welfare, Dhaka
2. M. M Neazuddin, Secretary, Ministry of Health and Family Welfare, Bangladesh Secretariat, Dhaka
3. Mr. Md. Shafiqul Islam Laskar, Additional Secretary (PH & WHO), Ministry of Health & Family Welfare,
4. Dr Kamal Uddin Ahmed, Joint Secretary (Political), Ministry of Home Affairs, Bangladesh Secretariat
5. Md. Khalilur Rahman, Joint Secretary, MOWCA
6. Mr. Azam-E-Sadat, Deputy Secretary, MOHFW
7. Dr. Md. Abdul Waheed, Line Director, (NASP), DGHS, Road 132, Gulshan 1, Dhaka
8. Dr Benazir Ahmed, Director (Disease Control) and Line Director, CDC, DGHS, Mohakhali, Dhaka
9. Brig Gen Md Nasir Uddin, Chief Health Officer, Dhaka City Corporation, Nagar Bhaban, Ministry of L
10. Prof. Mahmudur Rahman, PhD, Director, Institute of Epidemiology, Disease Control & Research (IEDCR),
11. Prof. Dr. Md. Sharfuddin Ahmed, Secretary General, BMA, 15/2 Topkhana Road,
12. Mr. Abu Yusuf Chowdhury, Chairperson SANB, 4/7 Humayun Road (Ground Floor), Block-B, Mohammadpur,
13. Ms. Jesmin Prema, Chairman SKUS, 110, Shantinagar, Nilufar Building, Dhaka,
14. ABM Nasirul Alam, DS, Chittagong Hill Tracts Affairs, Bangladesh Secretariat
15. Ms. Habiba Akhter, ED, AAS & President NNPLWHA, House # 8/1, Aurangajeb Road, Block-A, Mohammadpur, Dhaka
16. Dr. Shahadat Hussain, Ex-Director, Islamic Foundation Bangladesh, Agargaon, Sher-e-Bangla Nagar,
17. Leo Kenny, Country Coordinator, UNAIDS, IDB Bhaban (E/8 Begum Rokeya Sarani, Agargaon
18. Dr. Tasnim Azim, Director Center for HIV/AIDS, ICDDR'B
19. Melissa Jones, Director, USAID/Bangladesh, US Embassy, Baridhara, Dhaka
20. Dr. Sukumar Sarker, Senior Technical and Policy Advisor, USAID
21. Dr. Jayantha Liyanjeg, WHO Bangladesh, WHO, House # 12, Road # 7, Dhanmondi R/A, Dhaka
22. Dr. AKM Mustafa, Director, National Institute of Diseases of the Chest and Hospital (NICDH), Mohakhali, Dhaka
23. Mr Michael McGrath, Country Director, Save the Children, (program PR-2 HIV)
24. Dr Md Shah Alam, Senior Manager Program, icddr, (program PR3 HIV)
25. Dr. Mohammad Jakirul Karim (DPM, CDC, DGHS, Mohakhali Dhaka
26. Dr. Mojibur Rahman, National Consultant, NTP, DGHS, (program PR1 TB)
27. Dr. JahirulKarim, Deputy Programme Manager, MPDC, DGHS, (program PR1 Malaria)
28. Dr Simon Raisin, Director, HIV/AIDS program, Save the Children (program PR-2 HIV), Gulshan-2, Dhaka
29. Dr. Lima Rahman,
30. Dr. Md Moktadir Kabir, Senior Programme Specialist, BHP, BRAC, (program PR2 Malaria)
31. Abu Nomaan Hossin, Team Leader, LFA, House- 83, Flat No.- 5/D, Road- 23, Gulshan-1,
32. Dr. Dipak Kumar Biswas, Programme Head, HNPP, BRAC (programme PR2 TB)
33. Dr. Md Moktadir Kabir, Senior Programme Specialist, HNPP, BRAC, (program PR2 Malaria)
34. Dr. Saydur Rahman, NASP, DGHS
35. Md. Abu Sayeed, GMS
36. Ahmedul Ghani, GMS
37. Pallavi Rai, GMS
38. Charles Dickinson, GMS
39. Manaj Kumar Biswas, CCM Coordinator, CCM Secretariat, MOHFW. Dhaka
40. Dr. Shahida Akter, Monitoring Officer, CCM Secretariat, MOHFW. Dhaka
41. Md. Faruk Miah, Administrative Assistant, CCM Secretariat, MOHFW. Dhaka.

**Absentees**

1. Mr. Dileep Kumar Das, Additional Secretary (UN), ERD, Ministry of Finance, Sher-e-Bangla Nagar
2. Ms. Nuri Shamsun Nahar, Joint Chief of Planning, Ministry of Health & Family Welfare, Bangladesh Secretariat
3. Dr. Baizid K Riaz, Director-III, Prime Minister's Office, Tejgaon, Dhaka 1206
4. Prof M Ridwanur Rahman, Head of Medicine, Shaheed Sharwardhy Medical College, & Member, MRG
5. Mr. S.M.Shafiuzzaman, Advisor, Bangladesh Association for Pharmaceutical Industries
6. Prof. Dr Khondokar Md Shefyetullah, Director General, Directorate General of Health Services (DGHS).
7. Ms Roxana Quader, Joint Secretary (Admin), Chittagong Hill Tracts Affairs, Bangladesh Secretariat
8. Mr. Dileep Kumar Das, Additional Secretary (UN), ERD, Ministry of Finance, Sher-e-Bangla Nagar
9. Mr. Bikash Kishore Dash, Joint Secretary (cell), Ministry of Women & Children Affairs, Bangladesh Secretariat
10. Dr. Shehlina Ahmed, Health and Population Advisor, DFID Bangladesh, 10 Gulshan Avenue, Gulshan 1, Dhaka
11. Dr. Abbas Bhuiya, PhD, Deputy Executive Director, ICDDR'B, Mohakhali, Dhaka
12. Dr. Ashaque Husain,, Director, MBDC and Line Director, TB & Leprosy, DGHS, Mohakhali, Dhaka
13. Kaosar Afsana, Director, BRAC Health, Nutrition and Population Program, Mohakhali, Dhaka. Representing NGOs on Tuberculosis,
14. Dr Baizid K Riaz, Director-III, Prime Minister's Office, Tejgaon, Dhaka 1206
15. Prof M Ridwanur Rahman, Head of Medicine, ShaheedSharwardhyMedicalCollege, & Member, MRG
16. Mr. Sk Atiar Rahman Dipu, Director, BGMEA, BGMEA Complex, 23/1 Panthapath Link Road, Kawran Bazar.
17. Mr. S.M.Shafiuzzaman, Advisor, Bangladesh Association for Pharmaceutical Industries
18. Mr Swami Sthiratmahananda, Assistant Secretary Moharaj, RK Mission, 27 R.K. Mission Road, Gopibagh,
19. Dr. Anisur Rahman, Deputy Programme Manager, NASP, DGHS, (program PR1 HIV)