

Minutes

Meeting of the National Committee of Experts (NCE) for programmatic oversight of GF grants and National Programs of TB/AIDS Control and Prevention

October 21, 2011

Participants:

NCE members:

1. **Aliona Serbulenco**, chief, Department of Public Health Policies, (MH)
2. **Lilia Gantea**, deputy-chief, Department of Health, Budget and Finance (MH)
3. **Iurie Osoianu**, deputy director, National Health Insurance Company
4. **Silviu Ciobanu**, coordinator, Program Officer, Communicable Diseases-HIV/AIDS, STIs and Viral Hepatitis (HSV) focal point, Division of Communicable Diseases, Health Security and Environment (DCE), World Health Organization (WHO)
5. **Gabriela Ionașcu**, coordinator, UNAIDS Moldova
6. **Gheorghe Caraseni**, independent consultant, League of PTHA
7. **Eduard Mihalas**, National Youth Council

Permanent guests:

1. PR UCIMP – Victor Volovei, Victor Burinschi, Svetlana Plamadeala
2. RP Center PAS– Liliana Caraulan
3. Fundația Soros Moldova – Vitalie Slobozian, Angela Bordeianu
4. LPTH – Igor Chilcevschi

CCM TB/AIDS Secretariat:

1. Oleg Barba, CCM Secretariat responsible
2. Violeta Teutu, Communication/Stakeholder Coordinator Advisor

Absentees:

a) 2 NCE members with the right to vote (the State Chancellery and Finance Ministry representatives) and the CCM TB/AIDS secretary, Ms. Snejana Turcanu (on holidays, but represented at the meeting by a Government delegate;

b) 2 Permanent guests: Mr. Stefan Gheorghita, the head of the National AIDS Center (coordinator of the National HIV/AIDS Program) and Mrs. Liliana Domente, the Coordinator of the National TB Program.

Objective of the meeting:

Programmatic evaluation of grants offered to R. Moldova by the GFATM and managed by two Principal Recipients (PRs): UCIMP/PCU and PAS Center.

Materials disseminated in advance:

- two dashboards for the evaluation of the HIV grant (one per PR);
- two dashboards for the evaluation of the TB grant (one per PR).

Programmatic reporting period:

1 January – 30 June, 2011

Session moderator:

The first part of the meeting was moderated, on the behalf of the CCM TB/AIDS, by Oleg Barba, responsible of the CCM TB/AIDS Secretariat.

In the opening, Mr. Barba: introduced participants, explained the justified/unjustified absences, informed participants about how NCE was established and what its purpose is, talked about the NCE work frame and introduced the tools of programmatic surveillance. Further, he asked NCE members to elect the chair of the Committee.

Mrs. Aliona Serbulenco, representative of the Ministry of Health (MH) suggested candidacy of Mrs. Gabriela Ionascu, the UNAIDS Moldova coordinator. All NCE members unanimously approved the candidature of Mrs. G. Ionascu as their chairperson. The second part of the meeting was moderated by Mrs. Ionascu.

Considering the fact that the two coordinators of the National TB and HIV/AIDS Programs were absent, NCE members asked the CCM secretariat to send them a formal letter (signed by the CNE chair), demanding appropriate explanations for their absence.

The second request made by the NCE members was to submit the dashboards in Romanian, because not all NCE members speak/understand English.

Further, the NCE chair suggested discussing the problematic indicators concerning TB and HIV/AIDS/ITS control. Firstly, the discussion focused on difficulties/problems encountered by the RP UCIMP/PCU in their efforts to reach the targets/indicators set up by the GF and the National Program for HIV/AIDS/ITS Prevention & Control (PNPC). Then, NCE addressed the ones encountered by the RP-PAS Center.

As a result, it turned out that two HIV indicators have not been reached:

- a) The number of pregnant HIV positive women, going through a full course of ARV treatment (45% of the targeted value of the indicator), and
- b) The number and % of CSWs included in outreach programs (45% of the targeted level).

When talking about problematic indicators, the UCIMP/PCU's executive director, Victor Volovei, mentioned that the failure to achieve the set up indicators was due to insufficient number of field workers and limited CSW outreach actions/projects. In order to redress the situation, RP PCU suggests a proper estimation of the real number of CSWs and an increase in the number of outreach projects to attain targets.

In the light of the facts stated above, the representative of SR Soros Moldova recommended reallocation of funds to increase the field outreach activities on prevention. Mrs. Ionascu mentioned that an eventual reallocation would be possible only on the basis of a formalized argumentation remitted by the sub-recipient.

The elected NCE chair advised organization of field visits for the NCE members to discuss with CSWs and NGOs, which provide activities of risk/harm reduction and undertake a field needs evaluation.

Although the PAS Center could get an A for its level of indicators attainment, the PAS representative explained that the target concerning the legal assistance for PLWHA was increased, because contacted legal advisers provided more legal assistance to the recipients than it was initially estimated. Also, thanks to co-financing and more efficient organization costs, in 2011, the PAS Center managed to double the number of trainings for its beneficiaries.

At the end of the discussion on HIV indicators, RPs requested CCM TB/AIDS' notification, through the NCE, on the need to:

- a) review the indicator concerning pregnant women HIV positive and children they gave birth to; and
- b) review the indicator concerning CSWs and identify, with the help of sub-recipients and PR and through TWGs, a way to improve this indicator.

Despite efforts made by the two PRs to control TB, the level of indicator attainment bears out poor results. In the opinion of NEC members, taking into consideration all the allocated funds at the national level and by the GF, the value of 44% success rate is unacceptable.

Programmatic dashboards data presented by PRs shows that the most problematic indicators are related to:

- a) the mortality rate
- b) the underestimated MDR rate
- c) the treatment success rate, both for sensitive TB and multidrug-resistant TB.

In the opinion of Victor Burinschi, UCIMP/CPU's director of TB programs, these poor results are due to:

- a) poorly organized direct treatment of patients;
- b) high level to drug resistance among TB cases.

MH representative informed participants that the last staff meeting at the ministry has voiced discontent with registered results at the republican level. NCE members considered the need to identify (based on Committee' status and CCM's operating manual) and apply specific leverage accountability of persons, who implement projects of TB prevention, but are absent from the session. In the opinion of UCIMP/PCU's executive director, the technical support offered by PRs and the GF is more than sufficient to ensure proper functioning of cabinets and doctors of Phtisiology. Consequently, such an accountability measure is required and so is the further conditioning of additional resource allocation on the basis of results registered.

In this context, NCE has recommended the elaboration, by the absent organizations, of an action plan, with real actions meant to redress the situation.

The member of NCE appointed by the WHO office in Moldova, Mr. Silviu Ciobanu, believes that TB is a social problem of general concern, not just PRs' priority. The international expert's report, developed at the WHO initiative, which is to be released in the near future, confirms this.

At the end of the discussion of TB component, PRs have voiced the request to:

- submit the programmatic dashboards shortly after submitting the reports to the GF (by 1 March 2012, for semester II, 2011 and by 1 September 2012 for semester I, 2012)

After the session, NCE members have met independently to conclude on oversight findings and make general recommendations concerning programmatic results/outcomes registered by the two PRs within the period January-June 2011.

NCE decisions:

1. Organization of field visits with the participation of NCE members to discuss with CSWs and NGOs, which provide activities of risk/harm reduction, assess the real situation and needs in territories.
2. Revision of the indicator/target concerning pregnant women HIV positive and children they gave birth to.
3. Revision of the indicator/target concerning CSWs and identification by the sub-recipient and PR of a way to improve this indicator, with the implication of TWGs.
4. Ask the National Programs Coordinators to reason, within the frame of a separate session, the poor achievement of top 10 indicators, for both HIV and TB components.
5. The CCM TB/AIDS Secretariat is to send a formal letter to absentees, demanding explanations for their absence.
6. Request the development, by the absent organizations, of a concrete action plan meant to re-dress the situation regarding TB and HIV/AIDS control.
7. Dashboards to be submitted shortly after PRs submit their progress reports to the GF (i.e. by 1 March 2012, for semester II, 2011 and by 1 September 2012 for semester I, 2012).