

**INFORMATION SESSION**

# **Quality and Timely Grant-making**

23 March 2023

# Agenda

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1. Introduction
2. Translate the Global Fund Strategy (2023-2028) into effective grant design
3. Plan and ensure implementation readiness so activities can start on day one
4. Enable timely & quality grant-making
  - i. Grant-making deliverables
  - ii. Overview of key changes
  - iii. Negotiations and PR submission
5. Next Steps & Resources
6. Q&A

# Introduction

# Two information sessions are planned, followed by Q&A sessions

**For those who have gone through grant-making in previous grant cycles:** The information sessions capture the key changes for Grant Cycle 7 and are sufficient.

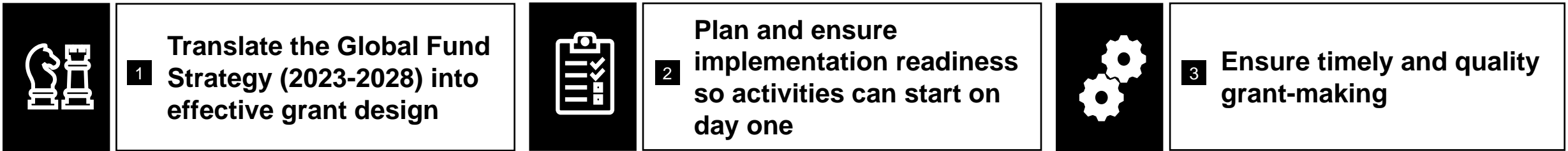
**For those who have not already been through grant-making:** Please attend the information sessions and complete the forthcoming eLearning module.

**All:** Read the new OPN and Operational Procedures for the full understanding of grant-making in Grant Cycle 7.

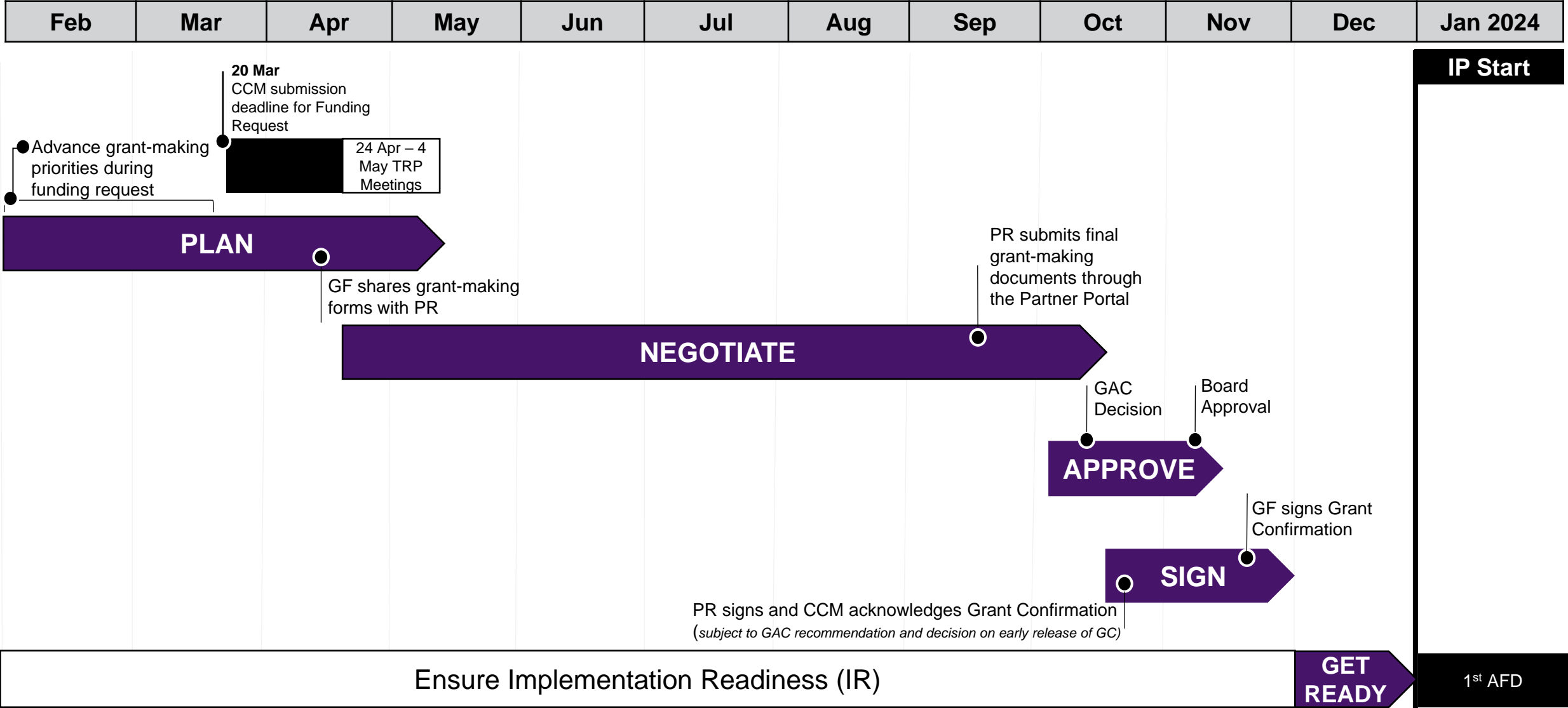
Suggested Audience	Purpose	March	April	May	June
PRs, LFAs, CCMs and any other interested stakeholders	<b>High-level introduction to grant-making</b> including key elements from the new Global Fund Strategy	<b>21 Mar Information Session #1</b> (simultaneous interpretations)			
PRs, LFAs, CCM Secretariats	<b>Detailed session on how to complete grant-making</b> on-time and with quality, for those directly participating in grant-making	<b>23 Mar Information Session #2</b> (simultaneous interpretations)	<b>[Date TBD] Q&amp;As</b> (EN, FR, ES)		<b>[Dates TBD]</b> System-specific Q&As (EN, FR, ES)

For a complete list of relevant information sessions and materials for grant-making please refer to the **Resources** slide.

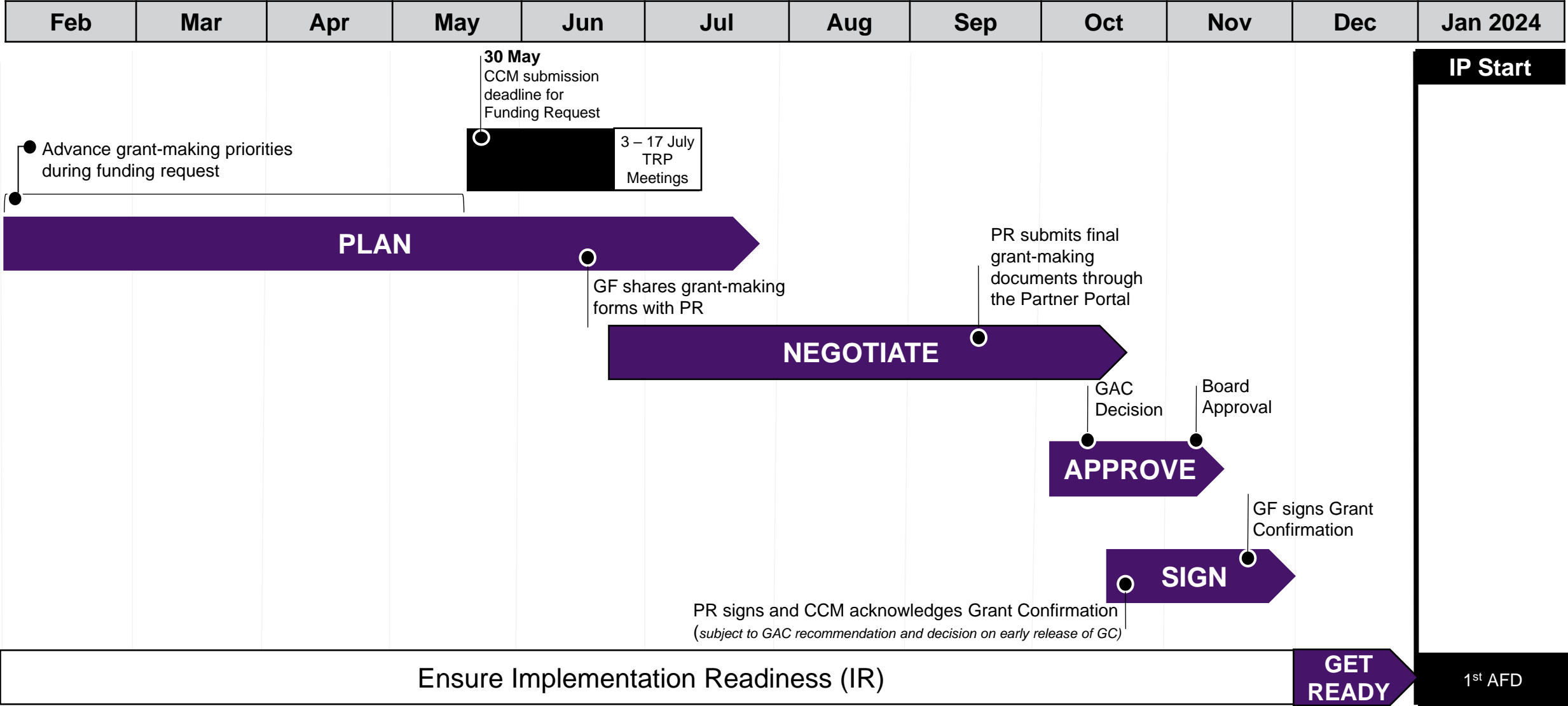
# Quality grant design and timely grant making embeds the new Strategy while ensuring implementation readiness



# Grant-making timeline for TRP Window 1 submissions



# Grant-making timeline for TRP Window 2 submissions



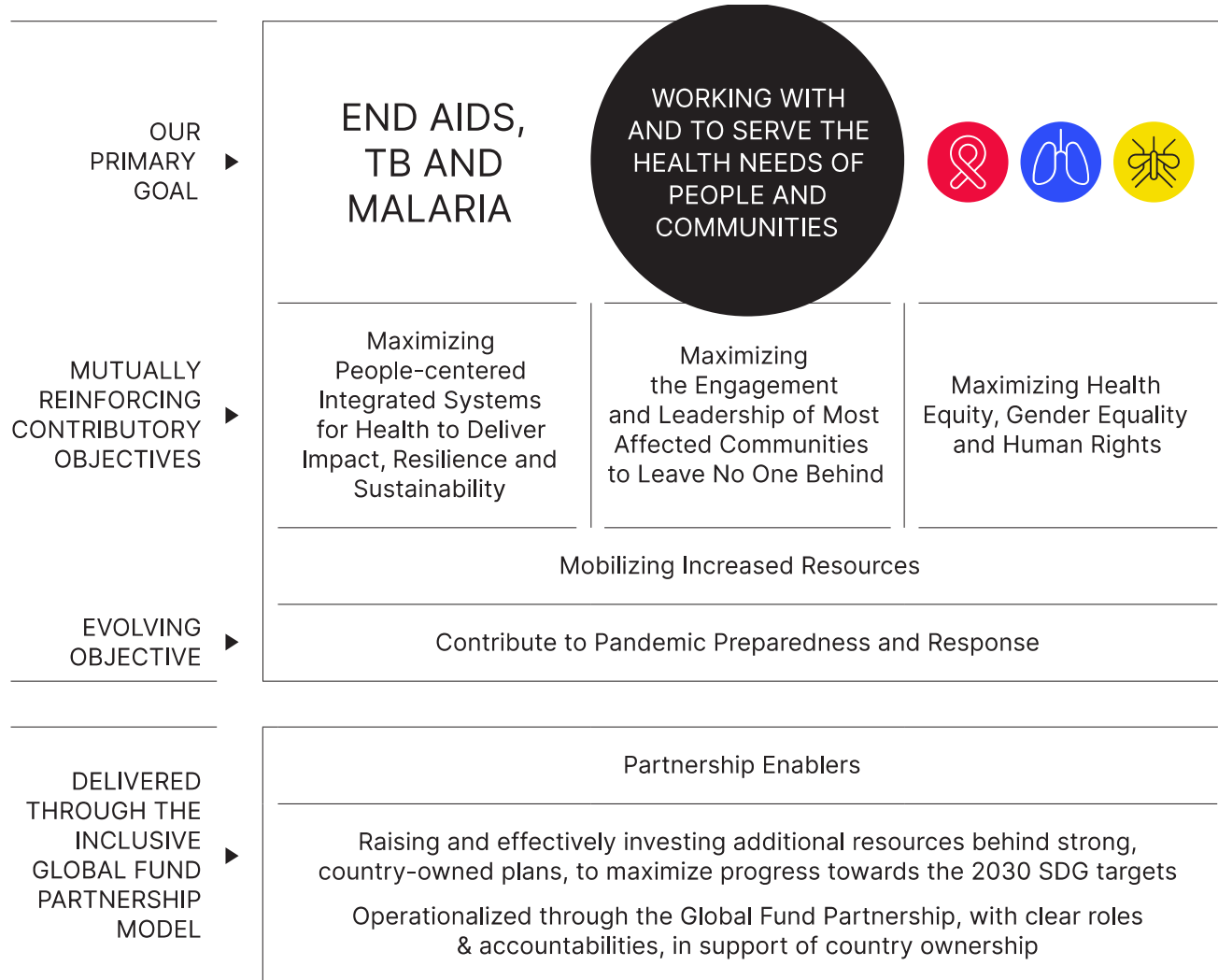


**1**

# **Translate the Global Fund Strategy (2023-2028) into effective grant design**



# Translate the Global Fund Strategy (2023-2028) into effective grant design to end the three diseases



**Maximize community engagement during grant-making**

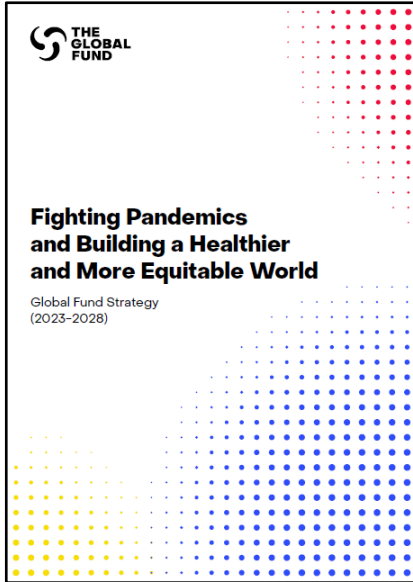
**Focus on program essentials and use of data**

**Strengthen investments in RSSH and Pandemic Preparedness**

**Enhance health equity, gender equality and human rights**

**Strengthen efforts to mobilize equitable, efficient additional domestic resources**

# Critical importance of communities in the new Global Fund Strategy demands increased opportunities for engagement throughout the grant life cycle



## Maximizing the Engagement and Leadership of Most Affected Communities to Leave No One Behind

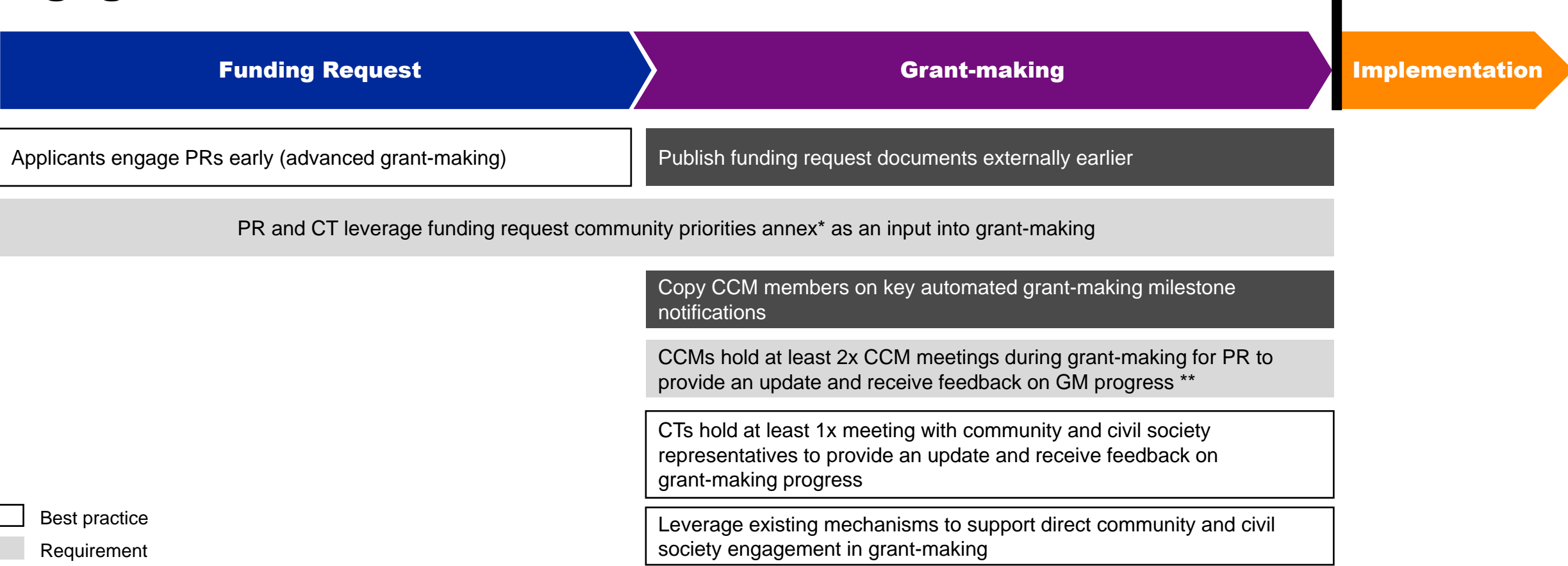
(one of three mutually reinforcing contributory objectives of the strategy)

Create opportunities for community and civil society **engagement beyond the funding request stage**

**Codify expectations and opportunities** for additional transparency, accountability and engagement in Global Fund policies and processes

**Increase CCM visibility** into grant-making process to facilitate engagement and oversight

# Changes during funding request and grant-making stages increase transparency, accountability and opportunities for community engagement



\* Funding priorities of civil society and communities affected by the three diseases.  
\*\* Requirement for High Impact & Core portfolios; best practice for Focused portfolios.

Mutual expectations must be clearly defined for all stakeholders to ensure meaningful engagement

# Engaging community-based and community-led organizations (CBO/CLO) as implementing partners is key to the success of the new Global Fund Strategy

## Why engage

- **Demonstrated ability** to deliver high-quality health services and programming
- **Unparalleled understanding of community** needs, preferences, challenges, and the acceptability of service delivery approaches
- Ideally positioned to:
  - Reach into communities to **find ‘missing’ beneficiaries**
  - **Provide differentiated services** to meet complex and diverse needs of different groups
  - **Foster understanding** of new interventions and **mobilize demand**
- More likely to be viewed as **trusted partners** by the communities they work with

## When to engage

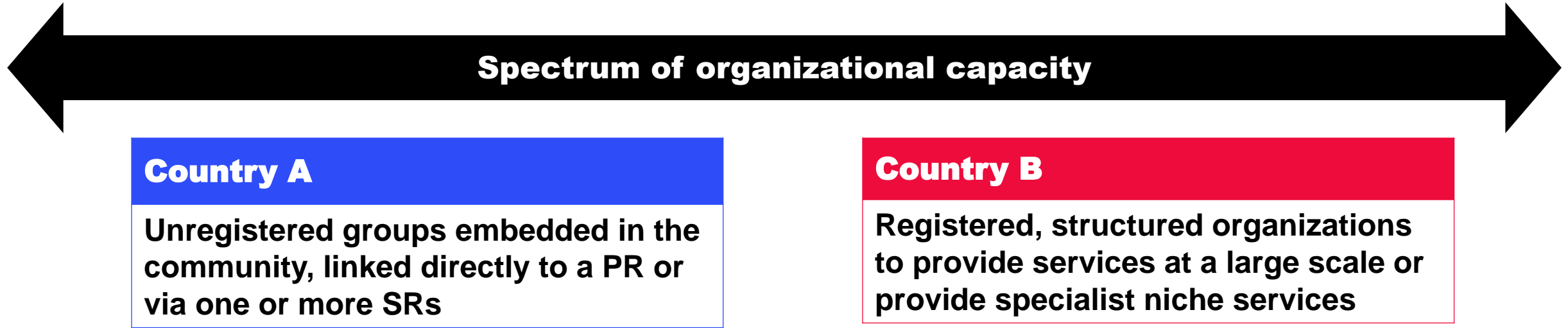
- Ability to implement a **wide range of activities** and in an equally **wide range of contexts**
- **Four specific contexts** where the Global Fund expects some level of engagement:
  - When **differentiated service delivery** approaches can enable greater impact.
  - When improving access and outcomes for **marginalized sub-populations** is an objective (including key populations).
  - When **introducing or scaling-up** new products or service-delivery approaches.
  - When seeking to safeguard **human rights** and reduce human rights-and gender related barriers to services.

## How to engage

Which organizations are engaged, and specific contracting modalities are **guided by programmatic objectives, local context, the specific needs of the communities** the grant intends to support, and an **understanding of potential risks** and how they can be mitigated. The Global Fund encourages engagement with a range of CBO/CLO implementers in order to **ensure the most appropriate partner is contracted to deliver the most appropriate service.**

# CBO/CLO implementers exist along a spectrum of organizational capacity, demanding different contracting approaches

In-country partners are encouraged to explore all contracting approaches that may be applicable to their country context and the capacity of relevant organizations, including the use of innovative approaches such as payment-for-results.



## Programmatic needs

- Which organizations are best placed to deliver?
- What support do organizations need to ensure adequate implementation and oversight?

## Payment for Results

- Can provide a means to for direct support of even the smallest organizations.
- May mitigate risks associated with contracting organizations with limited capacity.

## Community systems strengthening

PRs are strongly encouraged to support the organizational capacity of well-performing CBOs/CLOs, including by leveraging:

- Grant investments in CSS
- Community Systems & Responses strategic initiative

# Maximizing health equity in Grant Cycle 7

## What is health equity?

- **Health inequities are differences in health outcomes that are unnecessary, avoidable, unfair and unjust. Equity is achieved when these differences are eliminated, and everyone attains their full potential for health and well-being.**
- A person's health is shaped by their everyday living conditions – these are the **social determinants of health and the drivers of inequity.**
- **PROGRESS Plus** acronym sets out some of the most common dimensions of health inequity:
  - **Place of residence;**
  - **Race/ethnicity/culture/language;**
  - **Occupation;**
  - **Gender/sex;**
  - **Religion;**
  - **Education;**
  - **Socioeconomic status;**
  - **Social capital;**
  - **plus** the important personal characteristics that impact on health equity, such as disability, sexual orientation and age.

## Why is equity a priority for the Global Fund?

- Global Fund Strategy 2023-2028 commits to **maximizing health equity and taking intensified action to address inequities.**
- **Inequities are directly linked to disease outcomes.**
- **We will not end the epidemics without addressing inequities.**
- **The most marginalized are being left further and further behind.**

## What's new in Grant Cycle 7?

- New requirements for **applicants to demonstrate how they will maximize health equity.**
- Strengthened focus on equity within the **Technical Review Panel's review criteria.**
- **Design interventions which respond to health inequities identified in the analysis in the funding request.**
- Progress will be measured through new **grant indicators to track performance in reducing inequities** in key HIV, TB and malaria grants.



2

**Plan and ensure  
implementation  
readiness so activities  
can start on day one**

# Implementation readiness (IR) enables PRs to start activities immediately upon IP start date and contributes to improved implementation in Y1

## Key considerations for achieving implementation readiness:

**1.**

### **Ensure IR throughout Funding Request (FR) and Grant-making (GM)**

- IR happens alongside FR development and GM negotiations, not after.
- Advance IR activities to the extent possible at each phase of the FR and GM processes.

**2.**

### **Consider advanced grant-making during FR development**

- Increase participation of PRs in funding request development, where appropriate.
- Strongly recommended for Program Continuation approach and where PR is continuing

**3.**

### **PR signs & CCM acknowledges after Grant Approvals Committee (GAC) recommendation**

- Earlier grant signing timelines, allowing additional time to finalize implementation readiness
- Subject to GAC decision whether the GC can be released for PR signature before Board approval

**4.**

### **Standardized IR assessment**

- LFA to conduct IR assessment within 1 month of IP start date and submit assessment report 2 weeks later, allowing issues to be identified and resolved soon after implementation begins
- CT to communicate mitigating actions to PR within 2 months of IP start date.



# Implementation readiness (IR) activities happen during funding request and grant-making, not after

## Funding Request

## Grant-making

### PLAN

- Determine PR human resource needs for grant-making
- Consider **advanced grant-making** (see next slide)

### NEGOTIATE

#### PR staffing:

- Define structure, TORs; or update\* existing TORs & extend contracts\*\*

#### SRs and suppliers:

- Select as early as possible
- Define and approve TORs
- Negotiate contracts\*\*

#### Implementation workplan:

- Discuss details for Yr1

### APPROVE

- Finalize implementation work plan

*After Board approval:*

- Sign contracts\*\*\*

### SIGN

- Finalize implementation work plan
- Sign pending HR, SR and supplier contracts
- PR initiates the PPM requisition (if applicable)

### GET READY

- Ensure:
  - All HR, SR and supplier contracts are signed
  - Implementation work plan agreed upon
  - PPM requisition approved by Global Fund (if applicable)
- CT requests LFA to perform IR assessment

### Implementation

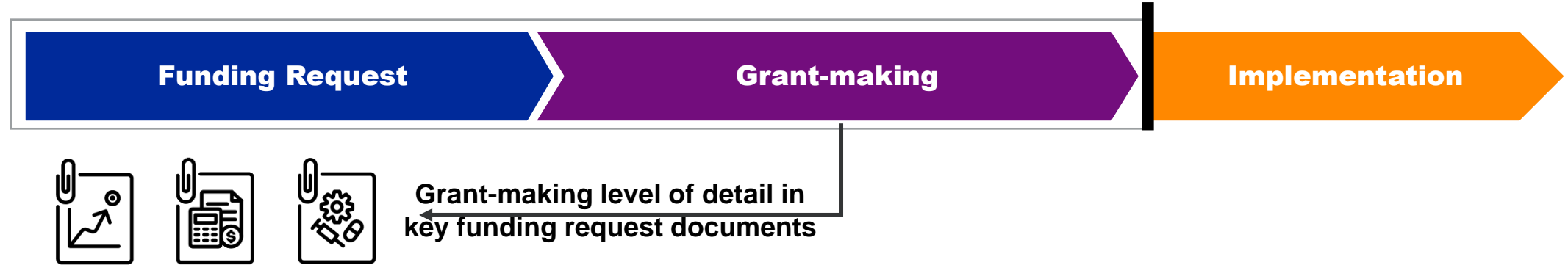
- LFA performs IR assessment & submits it to Global Fund

\* For existing, well-performing PRs only

\*\* The Global Fund does not require a competitive re-selection of human resources, SRs, and Suppliers (for PRs procuring through their own processes) for each IP. Re-selection must comply with applicable Global Fund policies and regulations.

\*\*\* In some cases, it may be possible for the PR to sign contracts earlier if local laws and PR procedures allow.

# Advance grant-making where appropriate and ensure implementation readiness



## Early engagement of PRs to advance grant-making

Applicants engage selected PRs early\* and develop the key funding request documents with grant-making level of detail.

## Implementation-ready grants can start on day one

PRs that sign early can implement grant activities immediately from the IP start date.

## Early signature can improve timely implementation

There is a correlation between grants signed early and timely implementation in Year 1.



**Advanced grant-making strongly recommended for the Program Continuation application approach or where the applicant continues with the existing PR.**

\* CCMs must still follow an open and transparent process to select the PR (Eligibility Requirement 2). The CCM compliance statement has been updated to accommodate early PR selection.

# Develop key funding request documents with a level of detail required during grant-making stage of the process



## Performance Framework

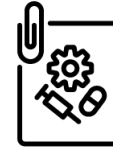
- Include PR-specific\* coverage indicators and targets, including disaggregation where applicable, with a six-month reporting frequency (for High Impact and Core portfolios).



## Detailed Budget

Include:

- PR-specific\* budget lines at the cost input level (for High Impact and Core portfolios).
- Detailed assumptions to support accurate unit costs.
- Ringfenced sub-recipient budgets\*\*.



## Health Product Management Template

Include:

- Detailed assumptions to support accurate quantifications and unit costs.
- Required supporting documents (e.g., quantification sheets, HPM plan, treatment and diagnostic protocols).

**Applicants that advance grant-making can gain up to 30 days to ensure implementation readiness.**

\* While documents are prepared with PR-specific information, these are consolidated within a single file for final FR submission to TRP. For integrated funding requests, applicants must discuss specific considerations with the Country Team.

\*\* Budget lines are assigned to sub-recipients to the extent possible, even if these implementers have not yet been identified or confirmed.



3

## **Ensure timely and quality grant-making**

# Grant-making deliverables

# Required deliverables are staggered throughout grant-making\*

## Finalize before TRP recommendation of FR

### Documents

Updated FR/GM Project Plan (Best Practice)

### System Updates / Actions

Grant Entity Data\*\*

Capacity Assessment (if applicable)

## Initiate immediately after TRP recommendation of FR

### Other

Early identification and selection of PR staff

Early identification and selection of SRs

Early identification and selection of suppliers\*\*\*

## Finalize prior to grant submission to GAC

### Documents

Performance Framework (Excel & PDF)

Detailed Budget (Excel & Summary PDF)

Health Products Management Template

New/Updated Implementation Arrangements Map

Programmatic Gap Table(s) (if updated)

Funding Landscape Table (if updated)

Grant Confirmation

Co-Financing Commitment Letter

Applicant Response Form for TRP issues

List of Program Assets (from current IP)

## Finalize at Grant Confirmation signing

### Documents

Monitoring & Evaluation Plan (if applicable)

### Other

Agreed Audit Arrangements

## Finalize before IP start date

### Documents

Agreed Implementation workplan for Y1

Approved ToRs and contracting of PR staff

Approved ToRs and contracting of SRs

Approved ToRs and contracting of suppliers\*\*\*

### System Updates / Actions

Approved PPM purchase requisition (if applicable)

## Finalize after IP start date

### Documents

Implementation Readiness Assessment

### Other

Selection of Auditors

\* Differentiated requirements per the Focused Portfolio Management Models are included in annex.

\*\* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

\*\*\* For health products and critical services.

- Submit to GAC for review.
- PR to submit in Partner Portal

# Focused Portfolio Management Models enable smart use of limited resources



**For Focused Portfolios:** Country stakeholders are encouraged to maximize the impact of their limited resources by tailoring the approach to the needs of the context.

The models are defined according to the **grant life cycle requirements** and the **type of oversight** by the Global Fund, as illustrated on the right.

## How does the Focused Portfolio Management Model impact grant-making?

- Reduced number of GM deliverables for the Aligned and Targeted models
- Reduced level of detail in deliverables for the Aligned, Targeted and Light models
- Additional focus on programmatic impact



[Click here](#) for detailed grant-making requirements for the four models

**Less**  
Grant  
Life Cycle  
requirements

**More**  
Grant  
Life Cycle  
requirements

**Aligned**

**Light**

**Targeted**

**Legacy**

## Delivery based

The Global Fund:

- Does not verify activities or inputs
- Leaves accountability to countries to use funds flexibly, to ensure delivery per agreement'
- Verifies results

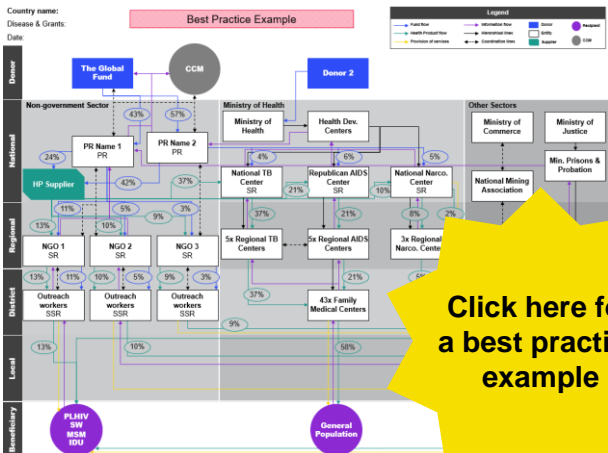
## Input based

The Global Fund:

- Confirms activities & inputs upfront with implementers
- Disburses against budget, and implementation progress
- Validates proposed implementation changes

# Implementation arrangements enable quality grant design, implementation readiness and risk mitigation

**Implementation Arrangements Maps** are a key tool to ensure **quality grant design**, by allowing stakeholders to develop and maintain a comprehensive understanding of the implementation arrangements, and assess their quality



Click here for  
a best practice  
example

## Key considerations in designing and assessing Implementation Arrangements Maps

Ensure alignment with grant objectives

Ensure alignment with grant documents  
(PF, Budget, HPMT, M&E plan, etc.)

Align scope and scale of  
responsibilities with capacity of  
identified entities

Ensure all stakeholders have access to  
the quality and timely information they  
need

Leverage existing entities and  
resources to address gaps,  
redundancies and achieve  
sustainability

Mitigate risks by ensuring:

- Segregation of duties
- Conflict of interest
- Limited concentration of funding / procurement in a single entity
- Inter/national regulatory compliance

**A high-quality implementation arrangements map facilitates implementation readiness** by ensuring the implementing entities, and their roles and responsibilities, are clearly defined in advance of the IP start date.



# Performance Framework



## What is the Performance Framework?

- Statement of expected performance over the implementation period.
- Reflects the ambition towards achieving program result and impact.

### Summary:

- Links program goals and objectives to program areas (modules), interventions, related indicators.
- Focuses on impact, outcome and coverage indicators.
- Includes targets against which results are to be reported by the country.
- Includes work-plan tracking measures (WPTM) to monitor additional grant-related activities (i.e., RSSH, CRG) in cases where no coverage indicators are possible/sufficient.
- Developed during funding request submission and further refined during grant-making.
- Used for grant performance assessment and KPI monitoring.
- Results against targets in the Performance Framework are one of the inputs to determine disbursements to the Principal Recipient during grant implementation.

# Performance Framework: Form enhanced to improve usability

## Enhancements have been made based on the feedback received

- ❑ **No structural changes** have been made to the form, only changes made for user-friendliness.
- ❑ **Data rows are now interchangeably colored** for readability.
- ❑ **Error alerts (rightmost column) has been added** to the Impact, Outcome and Coverage Indicators.
- ❑ **Default decimals and rounding are set** for impact, outcomes and coverage indicators
- ❑ The **reverse indicator columns for standard and custom coverage indicators** have been added with Yes/No values (read-only for standard and editable for custom coverage indicators).
- ❑ The single Print View sheet has been removed and replaced by **5 Print View sheets**: Summary, Goals and Impact, Objectives and Outcome, Coverage, WPTM (since the structure has been significantly changed for printability and readability, please do report additional needed changes).
- ❑ The **population column has been removed** from the Overview (WPTM), the Coverage Indicators and the WPTM.
- ❑ **New tab included to document target assumptions.**

# Detailed Budget: Summary of key changes

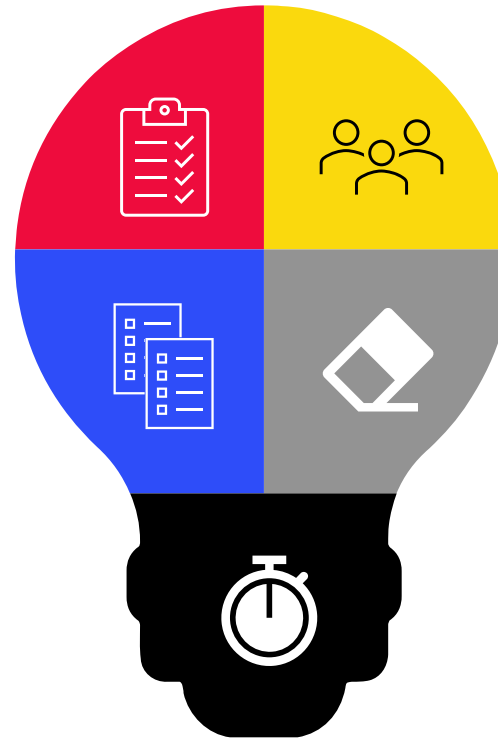
## Standardization of Budget Assumptions

Reintroduced following standardized budget assumptions tabs:

- Budget Assumptions – Human Resources (HR) tab
- Budget Assumptions –Travel-related costs (TRC) tab

## Split of the Detailed Budget Tab

- **Detailed Budget – Non-HP tab:** to be used for budgeting non-health product (non-HP) related budget (all cost grouping except 4,5,6 and 7).
- **Detailed Budget – HP tab:** to be used to copy and paste the output (relevant information) of the Health Product Management Template (HPMT), where applicable.



## Budget frequency

- Introduction of yearly budgeting instead of quarterly budgeting

## Update and standardization of reference data

- **Modules, Interventions and cost inputs** based on latest Modular Framework and Costing Dimensions
- **“Type of Implementing Entity”** as per Grant Entity Data
- **“Type of Third-Party Supplier”** to align with the requirement of direct payment to third-party supplier
- **“Geography”** and **“Source of Funds”** dimensions

## Tabs removed

- Removed **Population tab** – no longer required.
- Removed **Additional summary tab** and replaced by a drop-down option in “Summary by source of funds” tab.

# Detailed Budget: At a glance

## The five types of tabs

### Setup Tab

Includes general information about the program, organized in three sections: i) Grant information; ii) Reporting set-up; and iii) Budget set-up.

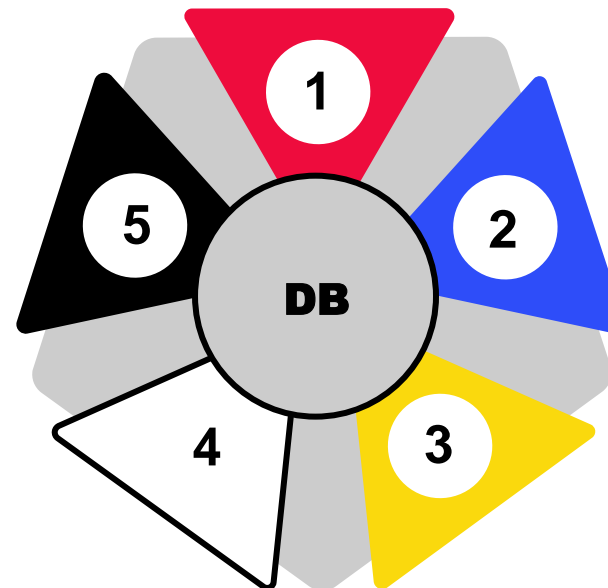
### ICR and Investment Landscape Tabs

- ICR tab provides an estimate calculation of the Indirect Cost Recovery (ICR)
- Investment landscape tab provides an overview of the investment landscape by key categories:
  1. Health Commodities/Equipment and Supply Chain Costs.
  2. Program Management Related Costs.
  3. Program Activity Related Costs.

### Summary Tabs

Four summary tabs which provide a snapshot of the budget grouped in pre-defined categories:

1. Budget Summary (by module, cost grouping and implementer);
2. Summary by Intervention.
3. Summary by Cost Input.
4. Budget Summary by Source of Funds



### Detailed Budget Tabs

Two separate “Detailed Budget” tabs

- One tab for **Health Products (HP)** budget
- One tab for **Non-Health Products** budget

### Assumptions Tabs

Standardized budget assumptions tabs for human resources (HR) and travel-related costs (TRC) and free sheet for other assumptions.

# Health Product Management Template (HPMT)

## Summary of key changes and enhancements (1/2)

### Updated Tabs

Tab	Update
Fixed Cost (HPM) Tab	Added
Other Implementers (Tab)	Added
Documents tabs (EN, FR, SP)	Removed
Cost Input Summary Budget	Removed
Module/Interventions Summary Budget	Removed
Module/Interventions with HIV KP Summary Budget	Removed
HIV Aggregation Summary Budget	Removed
Populations Summary Budget	Removed
DB-pivot	Renamed ( <i>formerly Blank Pivot</i> )

### HPMT and Finance Detailed Budget integration

- The HPMT is mandatory for all High Impact and Core countries, and optional for Focused countries (with some exceptions for Focused countries submitting a HPMT).
- For portfolios with health products (HP) budget but no HPMT, the Finance Detailed Budget allows entries for cost grouping 4 – 7 for HPs. **PRs need to check “No HPMT” on the set-up tab of the Finance Detailed Budget**, enabling them to manually input the budget for HPs into the “DB - non-HP worksheet” of the Finance DB.

### Updates to Key Information Sheets

- Reflects changes in the **GC7 Modular Framework** and the enhanced list of product categories.
- **Consolidates HIV lab and diagnostic data**, focusing only on key information.
- **Does not collect information on the number of type of Viral Load/Early Infant Diagnosis platforms and number of tests/sample type/equipment type per year.** This can now be submitted with supporting documents.

### Consolidation of HIV, TB, Malaria input worksheets

- HIV, TB, malaria – input worksheets are now consolidated in two tabs:
  1. PHARMA
  2. NON-PHARMA
- The “Other-HPs” tab have been removed.

# Health Product Management Template (HPMT)

## Summary of key changes and enhancements (2/2)

### SETUP Tab

- Re-designed SETUP worksheet (non-PR implementing organizations can be specified – e.g. sub-recipients.)
- Revised approach on HPMT version tracking with a table that lists up to seven HPMT revisions for funding request, grant-making and grant implementation.

### HIV, TB and malaria input worksheets

- Users can now select between US\$ and EUR for “payment currency”. This can differ from the grant currency.
- Reference prices for certain health products are pre-populated in the template and are adjustable by users +/- 30% with proper justification.
- Users can now select item level procurement channel.
- Summary tables are now available for users to input worksheets and show sub-total for each section.

### Fixed Cost and Other Implementers Tabs

- **Fixed Cost:** Users can budget PSM/HPM costs at fixed rates.
- **Other Implementers:** Users can include in the HPMT Health Product budget for more than one implementer.

### Detailed Budget (DB)

- The updated HPMT integrates better with the Finance DB. The HPMT output can now be copied and pasted into the DB, aligning two key Global Fund grant documents.
- Users can now split-up HP budget between modules/interventions.

### RSSH and HPM Cost Tabs

- **RSSH:** Users can budget for HP for RSSH interventions.
- **HPM cost:** For percentage based PSM/HPM costs, users can define percentages individually for each year.



The **HPMT User Guidelines** are available with an excel-based **Annex** that enables users to search tables.

### Checker Tab

- **Enhanced Checker Tab functionality** to support users in generating component-based category-wise annual budget chart).

The HPMT presents an **opportunity to develop a HPM Plan** to provide a holistic overview of PSCM functions in-country.

# Grant Agreement Structure

STEP  
1

## Framework Agreement

- Defines the **overarching terms of the collaboration** between the Grantee and the Global Fund.
- **Grantee: an independent entity**, who signs a Framework Agreement with the Global Fund

**Covers all grants** implemented by the Grantee or the Principal Recipients acting on its behalf.

**Incorporates the Global Fund Grant Regulations** (2014), which set forth general terms and conditions for use of grant funds and program implementation.

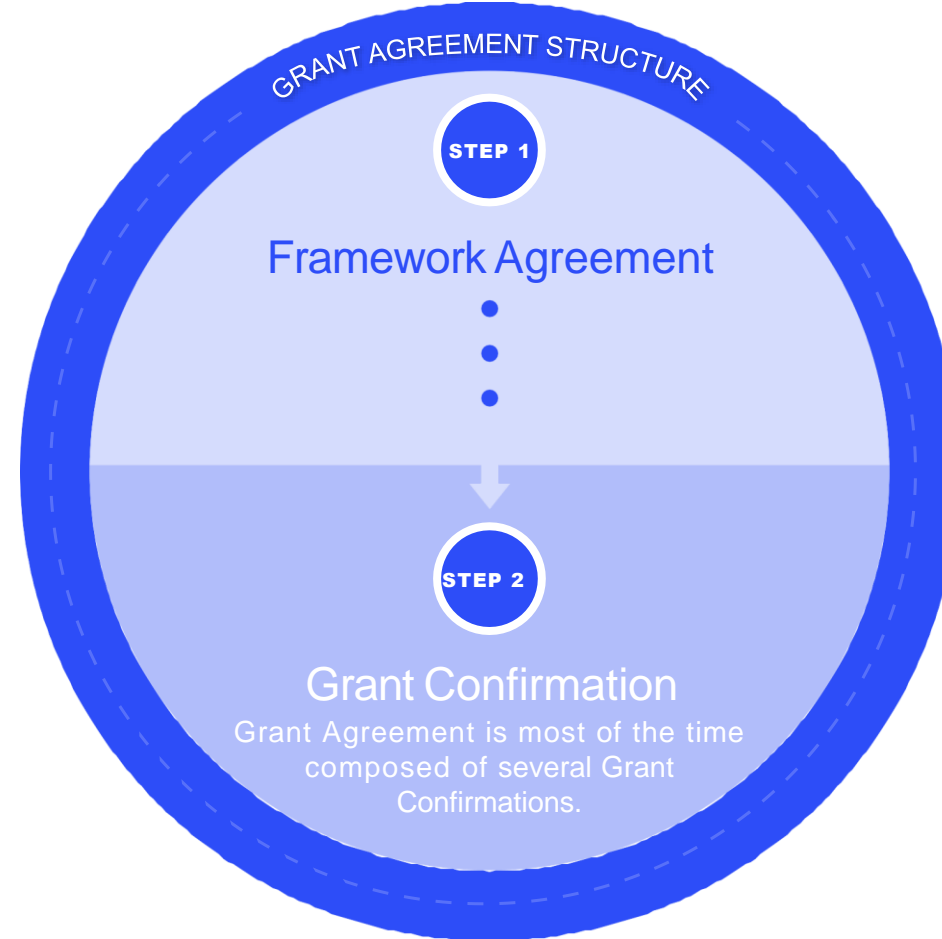
STEP  
2

## Grant Confirmation

A new grant confirmation is signed each time a Principal Recipient is selected to implement activities during a grant life cycle.

**Includes**, among others:

- Implementation Period (IP) start and end dates.
- General and IP-specific legal requirements.
- Integrated grant description.
- Performance Framework.
- Summary budget.



**Start negotiations early on ahead of signing a framework agreement.**

# Overview of key changes



# Key process and system changes to optimize grant-making and ensure end-to-end transparency



Partner  
Portal

- PRs use the Global Fund Partner Portal to access and **submit final grant-making documents**
- **Grant-making status** displayed to facilitate PR tracking of grant-making progress.
- **Critical Grant Entity Data** also managed through the Partner Portal (next slide).
- **Revamped Portal notifications** to increase end-to-end transparency for all stakeholders

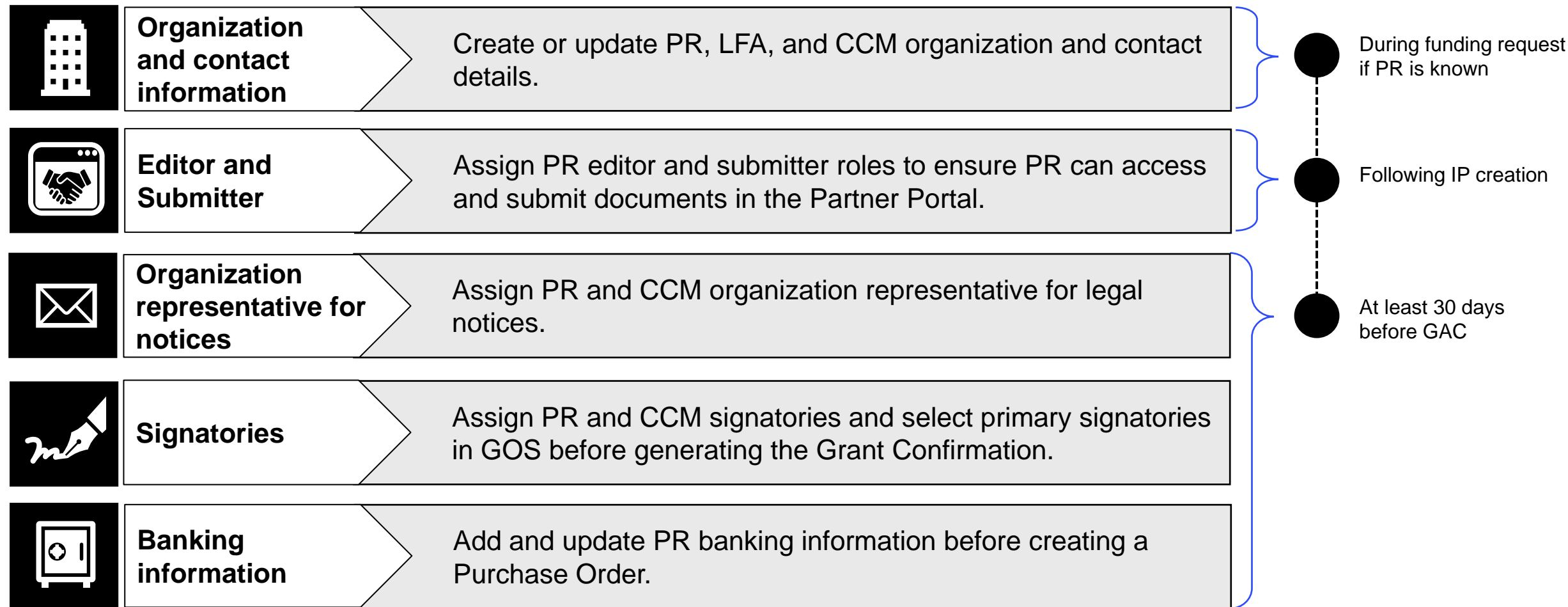



Grant  
Confirmation  
(GC)  
Signature

- Early signing of the Grant Confirmation, with **PR signature and CCM acknowledgement** following the recommendation of the Grant Approvals Committee (GAC) as a standard approach\*

\* Early PR signature and CCM acknowledgement is decided by the GAC.  
Global Fund counter signature remains contingent upon Board approval.

# Critical Grant Entity Data (GED) for grant-making and timelines to finalize



 Update GED early. Change requests can take up to **6 weeks**.

# Grant-making overview

In grant-making, the PR uses the Partner Portal to:

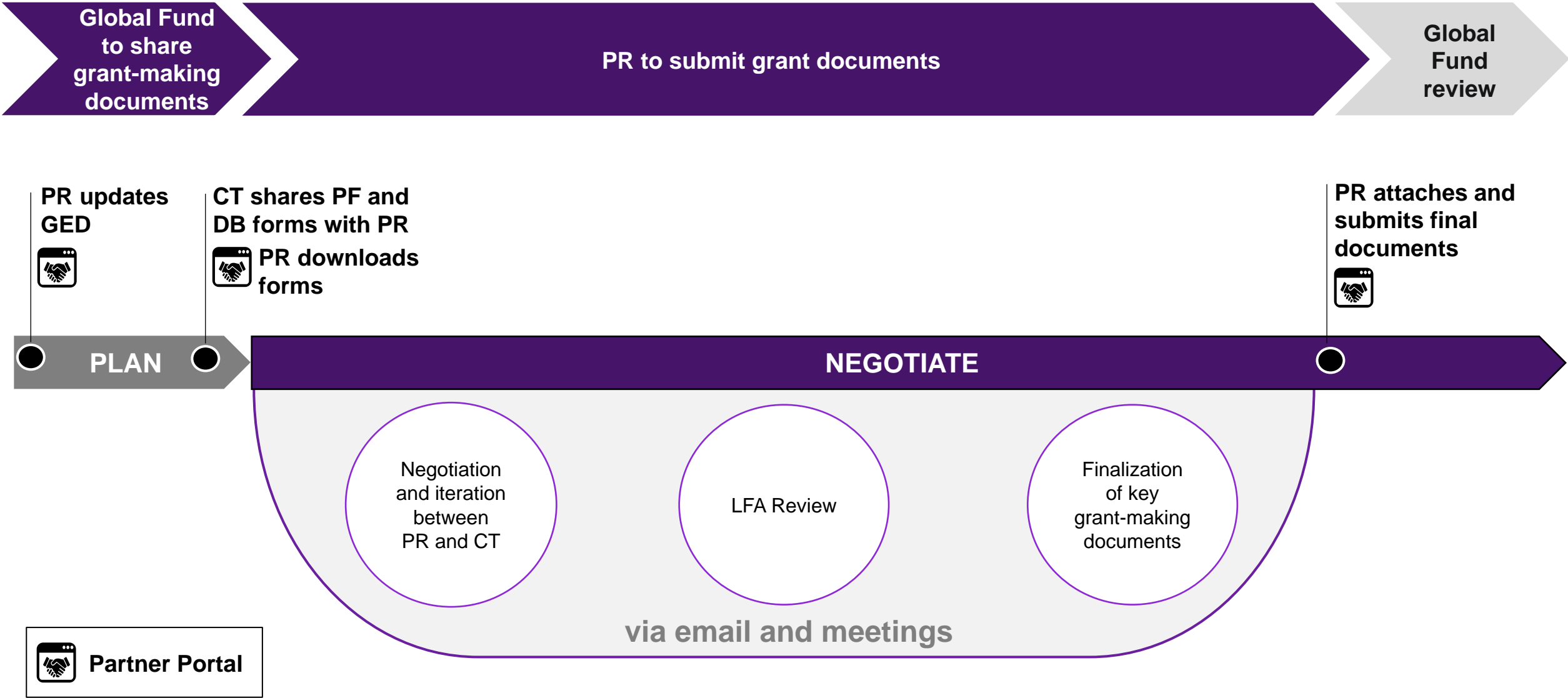
- **Update GED**
- **Download grant-making forms**
- **Attach & submit final grant documents**

An end-to-end **grant-making status chevron** is displayed in Partner Portal to increase transparency and accountability throughout each phase of grant-making.



\* Global Fund counter signature remains contingent upon Board approval.


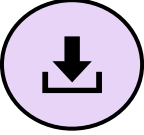

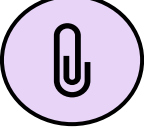


# Negotiate, iterate and review of grant-making documents via email and meetings before PR submits final documents in the Partner Portal



# Grant-making through the Partner Portal





## Steps for Principal Recipients

		ROLE
	<b>01</b> Access the Global Fund Partner Portal	<b>Editor</b> <b>Submitter</b>
	<b>02</b> Download grant-making forms	<b>Editor</b> <b>Submitter</b>
	<b>03</b> Negotiate grant (Iterations of documents via email / meetings)	
	<b>04</b> Attach and select grant-making documents	<b>Editor</b> <b>Submitter</b>
	<b>05</b> Submit final grant-making documents to Global Fund	<b>Submitter</b>
	<b>06</b> Fully signed Grant Confirmation available in Partner Portal *	<b>Editor</b> <b>Submitter</b>

### RECAP

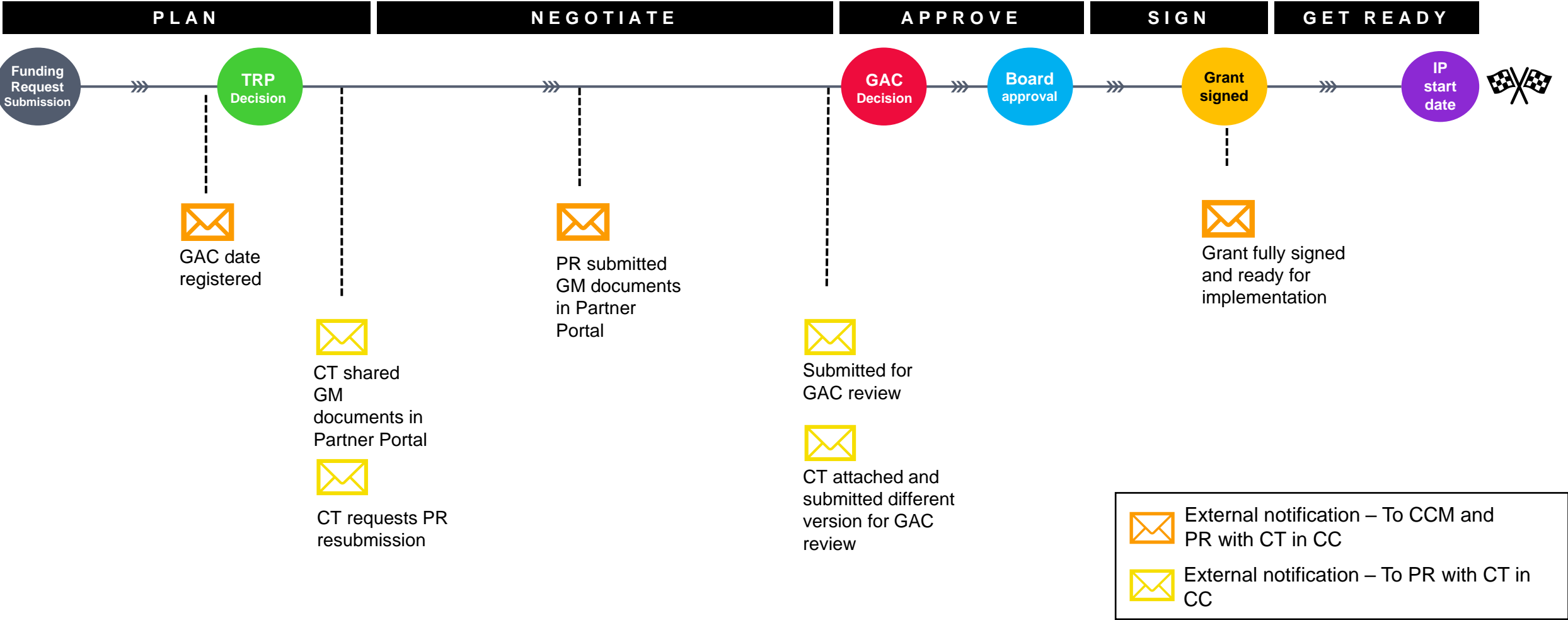
- Editor and Submitter **rights are assigned in GED per grant.**
- At a minimum, **each grant is required to have one Submitter. We recommend having two Submitters per grant.**

### KEY

-  Steps completed through the Global Fund Partner Portal
-  Steps completed outside of portal

\* The Grant Confirmation will be exchanged via email during the Negotiate and Sign phases. Once the grant-making process has been fully closed, the signed Grant Confirmation will be available in the Partner Portal for future reference.

# Notifications have been revamped to align with the Strategy and deliver a transparent end-to-end overview for CTs, PRs and CCMs





# Partner Portal Demos

## **Downloading grant-making documents from the Partner Portal**

<https://youtu.be/B9FWcyaW6f0>

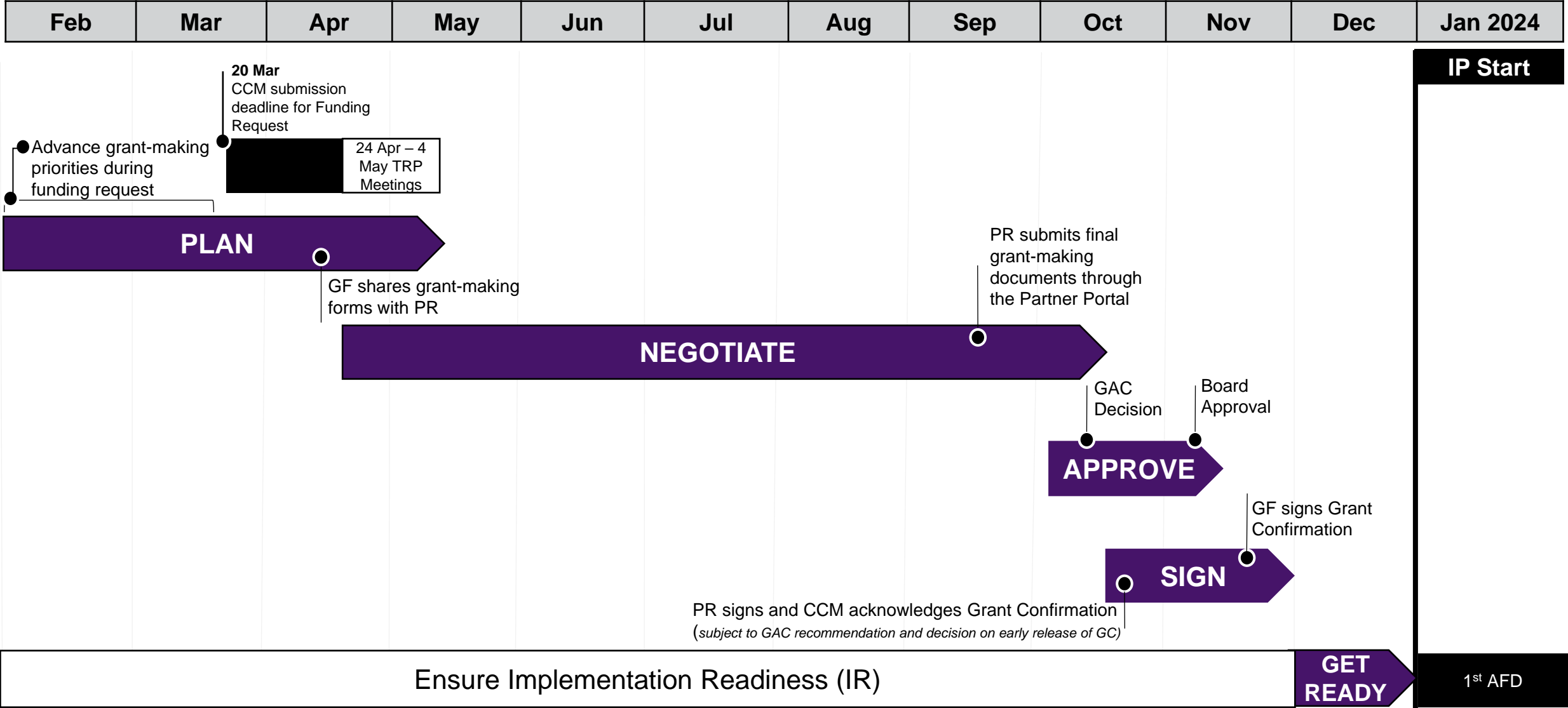
## **Attaching and submitting final grant-making documents**

<https://youtu.be/euIPamQja-8>



# Next Steps & Resources

# Grant-making timeline for TRP Window 1 submissions



# Grant-making Resources

## The Global Fund Website

- [Grant-making page](#)

Resources and links	Audience
Grant-making external information session slides and recording <ul style="list-style-type: none"><li>• Recording: link forthcoming</li><li>• Presentation: <a href="#">EN</a>   <a href="#">FR</a>   <a href="#">ES</a>   <a href="#">PT</a></li></ul>	PRs, CCMs and LFAs
Operational Policy Note (OPN) and Operational Procedures on Make, Approve and Sign Grants (within the <a href="#">Operational Policy Manual</a> )	PRs, CCMs, and LFAs
Grant-making Handbook for PRs (link forthcoming)	PRs
Partner Portal Guide with detailed guidance on PR system steps (link forthcoming)	PRs
GED external guidance: <a href="#">EN</a>   <a href="#">ES</a>   <a href="#">FR</a>	PRs, CCMs, LFAs
Grant-making eLearning (link forthcoming)	PRs, CCMs, and LFAs
Demos: <ul style="list-style-type: none"><li>• <a href="#">Downloading grant-making documents from the Partner Portal</a></li><li>• <a href="#">Attaching and submitting final grant making documents</a></li></ul>	PRs

# Related Resources

Subject Area	Resource
Funding Request	<a href="#">Funding request forms and other materials</a>
Community-led and community- based organizations	Relevant Technical Briefs: <ul style="list-style-type: none"> <li>• <a href="#">Community Engagement: A Guide to Opportunities Throughout the Grant Life Cycle</a></li> <li>• <a href="#">Community Systems Strengthening (CSS) Technical Brief</a></li> <li>• <a href="#">Community Systems Strengthening Interventions in Global Fund Grants: Decision-making Guide</a></li> </ul>
Health Equity	<ul style="list-style-type: none"> <li>• <a href="#">The Global Fund's technical briefs on Equity, Human Rights, Gender Equality, Key Populations and Community Engagement</a></li> <li>• World Health Organization's <a href="#">Innov8 tool</a> to identify and address in-country health inequities</li> <li>• <a href="#">World Health Organization and The Global Fund's report on the State of Inequality in HIV, TB and malaria</a></li> <li>• The Global Fund's Health Equity e-learning module (forthcoming)</li> </ul>
Co-financing	<ul style="list-style-type: none"> <li>• <a href="#">Operational Policy Note on Co-Financing</a></li> <li>• <a href="#">Updated Funding Landscape Table (FLT)</a></li> <li>• Sustainability, Transition, and Co-Financing Guidance Note (<a href="#">English</a>)</li> <li>• Sustainability, Transition, and Co-Financing Policy (<a href="#">English</a>   <a href="#">Español</a>   <a href="#">Français</a>)</li> <li>• <a href="#">Co-financing Commitment Letter Template</a></li> </ul>
Sexual exploitation, abuse and harassment (SEAH)	<ul style="list-style-type: none"> <li>• Guidance Note on SEAH (<a href="#">English</a>   <a href="#">Español</a>   <a href="#">Français</a>   <a href="#">Português</a>)</li> </ul>
Performance Framework	<ul style="list-style-type: none"> <li>• <a href="#">Modular Framework and Indicator Guidance Sheets</a></li> <li>• Indicator prioritization (<a href="#">HIV</a>, <a href="#">TB</a>, <a href="#">malaria</a>, <a href="#">RSSH</a>)</li> </ul>
Detailed Budget	<ul style="list-style-type: none"> <li>• <a href="#">Guidelines for Grant Budgeting</a> <ul style="list-style-type: none"> <li>◦ <a href="#">Operational Guidance for Grant Budgeting</a></li> </ul> </li> <li>• <a href="#">Detailed Budget Instructions</a></li> </ul>
Health Product Management Template	<ul style="list-style-type: none"> <li>• <a href="#">Health Product Management Template</a> (available in multiple languages)</li> <li>• Health Product Management Template User Guidelines for Allocation Period 2023-2025 (<a href="#">English</a>   <a href="#">Español</a>   <a href="#">Français</a>)</li> <li>• <a href="#">Health Product Management Template: Annex to the User Guidelines</a> (<a href="#">English</a>)</li> </ul>

# Annex



# Focused Portfolio Management Models

# Focused portfolios: Maximize community engagement during grant-making

## Requirement

- PR and CT consider community priorities funding request annex\* as an input into grant-making.

## Best practice


- CCM convenes at least two meetings for PR to provide an update and receive feedback on the progress of grant making.
- CT convenes at least one meeting with community and civil society representatives to provide an update and receive feedback on the progress of grant making.



\* Funding priorities of civil society and communities affected by the three diseases.

# Focused portfolios: Aligned model requirements

## Finalize before TRP Recommendation of FR

### System Updates / Actions

-  Grant Entity Data\*
- Capacity Assessment (if applicable)



-  Submit to GAC for review.
-  PR to submit in Partner Portal

\* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

\*\* Only for areas in which the Global Fund is investing.


## Finalize prior to grant submission to GAC

### Documents

-  Programmatic Gap Table(s) (if updated)\*\*
-  Funding Landscape Table (if updated)
- Grant Confirmation
- Co-Financing Commitment Letter
- Applicant Response Form for TRP issues

## Finalize at Grant Confirmation signing

### Documents

-  Monitoring & Evaluation Plan (if applicable)
- Other**
  - Agreed Audit Arrangements

## Finalize after IP start date

### Other


- Selection of Auditors





# Focused portfolios: Targeted model requirements

## Finalize before TRP Recommendation of FR

### System Updates / Actions

-  Grant Entity Data\*
- Capacity Assessment (if applicable)

-  Submit to GAC for review.
-  PR to submit in Partner Portal






\* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

\*\* Differentiated instructions.

\*\*\* Only for input-based components of the grant.


## Finalize prior to grant submission to GAC

### Documents

-  Performance Framework\*\*
-  Detailed Budget\*\*
-  New/Updated Implementation Arrangements Map\*\*\*
-  Programmatic Gap Table(s) (if updated)
-  Funding Landscape Table (if updated)
- Grant Confirmation
- Co-Financing Commitment Letter
- Applicant Response Form for TRP issues

## Finalize at Grant Confirmation signing

### Documents

-  Monitoring & Evaluation Plan (if applicable)
- Other**
  - Agreed Audit Arrangements

## Finalize before IP start date

### System Updates / Actions

- Approved PPM purchase requisition (if applicable)\*\*\*

## Finalize after IP start date


### Other



- Selection of Auditors

# Focused portfolios: Light model requirements

## Finalize before TRP Recommendation of FR

### System Updates / Actions

-  Grant Entity Data\*
- Capacity Assessment (if applicable)






-  Submit to GAC for review.
-  PR to submit in Partner Portal

\* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

\*\* Differentiated instructions.


## Finalize prior to grant submission to GAC

### Documents

-  Performance Framework\*\*
-  Detailed Budget\*\*
-  New/Updated Implementation Arrangements Map
-  Programmatic Gap Table(s) (if updated)
-  Funding Landscape Table (if updated)
- Grant Confirmation
- Co-Financing Commitment Letter
- Applicant Response Form for TRP issues

## Finalize at Grant Confirmation signing

### Documents

-  Monitoring & Evaluation Plan (if applicable)
- Other**
  - Agreed Audit Arrangements

## Finalize before IP start date

### System Updates / Actions

- Approved PPM purchase requisition (if applicable)

## Finalize after IP start date


### Other



- Selection of Auditors

# Focused portfolios: Legacy model requirements

## Finalize before TRP Recommendation of FR

### System Updates / Actions

-  Grant Entity Data\*
- Capacity Assessment (if applicable)






-  Submit to GAC for review.
-  PR to submit in Partner Portal

\* Submitter (and Editor) data must be reviewed and updated as soon as possible to allow access to the Partner Portal. Signatories, Org. Reps for notices and banking Information must be updated prior to GAC submission.

\*\* Differentiated instructions.


## Finalize prior to grant submission to GAC

### Documents

-  Performance Framework\*\*
-  Detailed Budget\*\*
-  New/Updated Implementation Arrangements Map
-  Programmatic Gap Table(s) (if updated)
-  Funding Landscape Table (if updated)
- Grant Confirmation
- Co-Financing Commitment Letter
- Applicant Response Form for TRP issues

## Finalize at Grant Confirmation signing

### Documents

-  Monitoring & Evaluation Plan (if applicable)
- Other**
  - Agreed Audit Arrangements

## Finalize before IP start date

### System Updates / Actions

- Approved PPM purchase requisition (if applicable)

## Finalize after IP start date

### Other

- Selection of Auditors