

AGENDA ITEM #3	Presentation about the Global Fund C19M		x																
AGENDA ITEM #4	Election of CCM Chair				x														

To add another 'Agenda Item' highlight the entire row corresponding to the last 'Agenda Item #' in the table. Right click on the mouse and click on the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows.

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #1	The opening of the meeting, presentation of the 84th CCM meeting decision implementation
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CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

None

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>

No

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED/

B.Myagmar: The meeting was chaired by B.Myagmar (Chair of the Country Coordinating Mechanism), introduced the meeting agenda and members approved the agenda.

B.Oyundari: Introduced the previous 84th CCM meeting decision and its action points.

SUMMARY OF DECISIONS & IMPLEMENTATIONS

84TH CCM MEETING BY ZOOM APPLICATION (2020-05-11)

AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW				KEY PERSON RESPONSIBLE	DUE DATE	
AGENDA ITEM #1	The opening of the meeting, issues to be discussed at the meeting, and the implementation of the previous CCM meeting				CCM	100%	
AGENDA ITEM #2	Reprogramming of savings from Global Fund-supported HIV / AIDS projects to fight COVID-19 pandemic				MOH, PR	100%	
AGENDA ITEM #3	Reprogramming of savings on HIV / AIDS and TB projects in 2018-2020				MOH, PR	100%	
	Calculation of Re-programming						
	No	Purchase item	Number of pieces	Per amount			Total amount
	1	1 year usage of 12 pcs of Gene Expert devices diagnosing device	12,672	11.5\$			\$ 145,437
	2	N95 masks	104,687	0.7\$			\$ 66,128
3	TB diagnosing devices in 9 provinces		15,382\$	\$ 138,435			
Total amount					\$ 350,000		
AGENDA ITEM #4	Organizational issues:					CCM	90%
	• Release and re-elect some members of the Oversight Committee						
	No	Name of the members	Position	Constitution	Election period		
	1	J. Munkhjargal	National Security Council- Oversight Committee Chair	Government organization	2018-01-31		
	2	A.Bayartsetseg	National Anti-Tuberculosis Association	Non-government organization	2020-05-15		
	3		Dermatology cabinet of MNUMS				
4	G. Nyampurev	Youth Health NGO	Public representative	2018-01-16			
5	S. Enkhjin	MOH specialist	Monitoring and evaluation department	2018-06-20			

SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM

Please summarize the respective constituencies' contributions to the discussion in the spaces provided.

AGENDA ITEM #2	COVID-19 impacts on grant implementation
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CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

None

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>

No

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

COVID-19 impacts on grant implementation

Presentation 1. D.Myagmardorj, Executive Director of the Youth Health NGO: COVID-19 Pandemic and MSM and TB Community HIV, AIDS and STI Prevention Program /**Appendix №1/**

Presentation 2. B.Gangerel, Executive Director of MATA: Global Fund-supported TB project 2018-2020 /**Appendix №2/**

Presentation 3. Gerelchimeg, PCU Specialist: Impact of the Global Fund-supported AIDS and TB Project on the COVID-19 Pandemic /**Appendix №3/**

SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM

Please summarize the respective constituencies' contributions to the discussion in the spaces provided.

NGO	<p>Ch. Semjidmaa:</p> <p>1. I would like to ask a question from D.Myagmardorj, Executive Director of Youth Health NGO. It was said that creating treatment standard for transgender people. Which organization is making it and at what stage that is going on?</p> <p>2. I am asking from PCU. During the project planning of 2020-2023, it was said that the detection of TB control was poor. There is Narcology center which is drug treatment center in west part of the city and treats about 2500-3000 people a year. The reason I mentioning this place is because there will be people with TB as well. But the place is a lack of manpower and equipment. Will PCU support this place and is this place has included or not?</p>
NGO	<p>D.Myagmardorj: In 2017, we started collecting information on this issue and left it to discuss the WHO standard and which direction to build in Mongolia. In May, the Regional Health Organization informed our center about the standard, and now it is continuing.</p>
PCU	<p>N.Tsogzolmaa: There is talk of involving additional organizations in the detection process, but this does not include the Narcology Center. The next project could include the construction of a separate small TB hospital with 10 beds at the Center for Compulsory Treatment of Alcohol and Drug Addicts.</p>
NSC	<p>J. Munkhjargal:</p> <p>1. I would like to ask a question from D.Myagmardorj, Executive Director of Youth Health NGO. There have been reports of new HIV / AIDS cases, which may be difficult to monitor. How much cooperation do you have with the NCCD and how difficult is it to find the main person?</p> <p>2. Are CCM members involved in organizations and ministries in charge of demographic policy on other issues in the standards of treatment for transgender people?</p> <p>3. There have been reports that the gay and trans youth community has been evicted from their homes, lost their homes and incomes, and have they applied to the relevant ministries and are there many people?</p> <p>4. It was said that alcoholism in the home is increasing and there are risks associated with it. Is there any research on how this has affected the risk group?</p> <p>5. I would like to ask a question from B.Gangerel, Executive Director of MATA. What type of TB cases were reported in 21 new TB cases and are their family members tested as well? It was said that provided food supplement to 35 people. Does the Ministry of Social Welfare and Labor provide food supplement through the districts, does it necessary to provide food, how does it selecting people and what kind of food providing to them?</p> <p>6. We provided methodological support and went to some provinces for site visiting. How does it selected? I can see some provinces that we already visited last time.</p> <p>7. 56 children were given food and gifts. What kind of TB people taking medicine at home?</p> <p>8. Electronic information is provided, that is good. But there are a lot of people out there who can't even use a smartphone. How do you reach these people?</p> <p>9. How do you protect the staff when the medicine is delivered to patient`s home? Can you solve these problems with less money usage?</p> <p>10. I have a question from PCU. You gave on the data that the treasury transaction was postponed, and when</p>

	<p>you said that it stopped, please answer in this regard.</p> <p>11. It is said to buy disinfectant. The Ministry of Health, the Emergency Management Agency, and the government also said that they would take it, so do we need to overlap it, and what exactly is this disinfectant going to take? Who provides for their needs and what substances are going to be used to disinfect them?</p> <p>12. RC is included in the finding list of lost TB cases. To be honest, I don't remember if this organization has ever brought a case of lost TB to the NCCD.</p> <p>13. It is said that Digital X-ray machine is not in use, what research did it say? We did not make a single attempt to move the existing X-ray machine to the right place and test it.</p>
NGO	<p>D. Myagmardorj:</p> <p>1. We report the number of HIV infections directly to the NCCD. The NCCD registers it and conducts epidemiological surveys. We are not involved in this. However, in the case of HIV and syphilis, we are responsible for providing services that do not lose the patient.</p> <p>2. The consultants for the Sustainability Assessment are asked to consult with the MSSMN, the Ministry of Health and other relevant organizations. This project is contracted with the Australian Organizing Association and Global Fund, our organization is branch recipient. If the region instructs us to get it approved by the CCM, we will get it approved in the future.</p> <p>3. In terms of the living standards of the elderly, 15 requests have been received since March, requesting assistance due to low living standards. Firstly, we are not an organization in this field, and secondly, we provide health care services, so the request was linked to the relevant organizations. Initially, the Czech Republic provided assistance.</p> <p>4. There is no denying that there is a high rate of alcoholism in the home and the accompanying diseases, but we are not able to know exactly who is drinking and where, so we are taking steps to raise awareness about the dangers.</p>
MATA	<p>B. Gangerel:</p> <p>1. There were 21 detected cases of pulmonary TB and infectious TB. These are detected by questionnaires. Screening questionnaires are filled out from people who have lived close to a TB patient.</p> <p>2. 35 patients were treated. The Global Fund provided assistance to 27 people in Ulaanbaatar and 8 people in rural areas. These people have a certificate from the khoroo and a certificate from the district dispensary, which is issued on that basis.</p> <p>3. In terms of methodological advice, we are working in all 8 eastern provinces with high TB incidence and all districts of Ulaanbaatar. It is mandatory to visit provinces once a year. In Ulaanbaatar, inspections are carried out twice a week.</p> <p>4. The standard of living of people with TB is low. It is also associated with social exclusion, these people lose their jobs and incomes, and their families are unable to support their children. For example, his father was recovering from TB treatment, but four of his children became infected with TB. So a fundraising campaign was announced to help these families.</p> <p>5. In terms of community outreach, Facebook is being used because it is difficult to reach out to COVID-19-affiliated households. This was done on the assumption that TB should be disseminated through Facebook in order to raise public awareness that TB is a dangerous disease that can be treated at a very high cost. Whether it's targeted at TB patients or not, we distribute leaflets to those people through our activists.</p> <p>6. Our volunteers work in risky conditions. We are talking about sewing and using the mask ourselves. However, as we are a non-profit volunteer organization, we operate only within the budget of the Global Fund, so it will take money to get materials and make masks ourselves.</p> <p>7. It would be effective to raise awareness about TB electronically, and in the future, it would be appropriate to disseminate TB information to the general public through television, radio and other media. Instead, we are distributing leaflets to our target group.</p>
PCU	<p>Gerelchimeg:</p> <p>1. Expenditure of state funds has stopped funding for trainings and meetings related to the embargo. The NCCD's TB Surveillance and Research Unit and STI training and funding stopped.</p> <p>2. In the case of disinfectants, masks and other disinfectants provided by the Ministry of Health and the Government are not included in the receiving organizations, and are therefore included in order to provide the human resources of the receiving organizations with hand sanitizers.</p> <p>3. What cases the Red Cross considers to be lost TB cases are not cases that have been lost under the control of the NCCD. There are cases when homeless patients do not come and disappear during treatment at Enerel Hospital. The Red Cross organizes a quarterly campaign to search for such people. In addition, we have requested include that the number of cases lost under the control of the NCCD this year be doubled from the previous one to the Red Cross Mongolia.</p> <p>4. The active detection of TB has been completely stopped due to the quarantine from January. Due to the</p>

	<p>cessation of these tests, these mobile devices are in hospitals with unopened boxes. Active detection of quarantine will not be possible until September. From September to December, it is not possible to complete all the tests that need to be done within 4 months. Given this situation, it is possible to install the device free of charge in medical institutions and use it for its intended purpose, so that it can be used for double detection. Medical facilities take X-rays until 2:00 p.m with a fee, but with the installation of a portable X-ray machine, it will be possible to work overtime for free.</p>
MOH	<p>T. Enkhzaya:</p> <p>1. The list of disinfectants to be made in 2020 was clarified. This is jointly approved by the Ministry of Health, the Ministry of Food and Agriculture, and the Ministry of Nature, Environment and Tourism, and is based on research. In particular, diluted chloride solutions and surface-based alcohol-based hand sanitizers are recommended for COVID-19. The Ministry of Health has announced a tender for 160 million MNT worth of disinfectants. Now it is expected to announce a tender for another 400 million MNT worth of disinfectants. With regard to COVID-19, we keep these in reserve because they are a key tool in preventing infection.</p> <p>2. I would like to clarify about the phone. We are cooperating with the Communications Authority, and it is estimated that 4 million people in Mongolia use mobile phones, of which 80% (3.2 million) use smartphones and 20% (800,000) use ordinary phones. It has proven to be the most effective way to provide information to the world through the telephone, and as a health education provider, it is increasingly advertising on mobile phones and social media. The Ministry of Health has temporarily postponed some trainings related to diseases such as TB and syphilis, as it is more important to provide information on current issues related to COVID-19.</p>
Trade Union	<p>B.Myagmar: I have a question from the branch recipients.</p> <p>1. In the presentation of the PCU, it was mentioned that the implementation of the criteria for the activities of the population at risk is 23%-32%, and it will be difficult in the future. How will we continue to work to achieve this, and will it be difficult to fulfill the 2020 plan?</p> <p>2. Are there any funding difficulties? There were no numbers in the MATA report, what is the percentage of the 2020 plan, are there any delays, and are there any financial difficulties?</p> <p>3. I would like to ask each of you if the PCU has studied how to cooperate with the Ministry of Health in this regard.</p>
NGO	<p>D.Myagmardorj: The criteria for the 2018-2020 project are quite high, and this year the situation has become even more difficult, and we are working to the best of our ability. Starting this July, the Sustainability Project will be able to conduct individual self-testing in collaboration with the Ministry of Health, which will greatly contribute to detection. This allows doctors to detect diseases in more people because they go from person to person rather than waiting for people. There are currently no funding difficulties.</p>
MATA	<p>B.Gangerel: MATA works on two main criteria. In total of 9 main activities, 8 are ongoing and 1 activity is pending which is a media and advocacy activity. In terms of detection, we do not meet the criteria. As of 2019, there are 88 detections out of 219 detected, and in 2020, there are 21 detections out of 248 detected. Detection is slow due to questionnaires and home visits. Delivery of drugs is normal, which is a high 95% every year. In terms of funding, it comes in regularly from the Global Fund and is normal.</p>
PCU	<p>Gerelchimeg: A total of 2 programs are being developed for the COVID-19 TB project.</p> <p>1. Branch recipients are currently developing an action plan on how to provide TB care without interruption during COVID-19, how to provide TB care in the event of a COVID-19 pandemic, and how to provide TB care. Upon completion, it will be approved by the Ministry of Health.</p> <p>2. The Ministry of Health will provide appropriate support for additional activities to be planned to achieve the 2020 performance indicators.</p>
Trade Union	<p>B.Myagmar: There is a shortage of TB specialists, how are they replenishing their human resources?</p>
PCU	<p>N.Tsogzolmaa: Specialist Ganzaya has returned to work. We are looking for someone to work replacement of Khishigee specialist.</p>
RO	<p>J. Ogdard:</p> <p>1. There is a question to ask the PCU. It is said to have a detection rate of 13%. This means that 87% are underperforming. It negatively affects the activities of all organizations and individuals due to COVID-19 pandemic around the world, and as a result, our religious organizations have moved to a new arrangement and set up a special working group. What measures is the PCU taking in this regard?</p> <p>2. I would like to ask a question from Myagmardor. Recently, there has been a growing tendency for transgender people and MSM to be treated as normal. How much propaganda is being done to reduce sexual harassment and prostitution about the impact of these people on society, and how does the Ministry of Health pay attention to this and work together?</p> <p>3. When asked about the effects of COVID-19 on TB patients, is there any research on the effects of COVID-19, and what measures are being taken?</p>

PCU	Gerelchimeg: We are working on a plan to fill the gap of 87%, and each of the recipients has an action plan, but we talked about how to increase it in relation to COVID-19. MATA and the MRC discussed how to work with the NCCD to help them find the lost cases of TB and to support them in their search for them as well as in the countryside.
NGO	D.Myagmardorj: Sexual orientation is innate, and it is impossible to keep it less. No matter what kind of sexual behavior we have, the main thing is to stay healthy. We do not consider it good or bad, but we do examinations and treatments to ensure their sexual health.
MATA	B.Gangerel: There is currently no study on the effects of COVID-19 on TB patients. The number of patients receiving medicines from volunteers increased from 465 in January to 548 in March. There are problems such as not sending medicines home and not asking questions. We are working as much as possible to working closely with district and khoroos staff to ensure that medications are not discontinued and that he is taking regular medications. As for the detection, it is bad, and we are focusing on increasing it.
NSC	J.Munkhjargal: I am proposing to expand your sample transportation activities. It does not make sense to say that a digital X-ray machine is in the box. I do not think the Minister of Health is still keeping it in the box, and do not to say that without proof. I am suggesting that to use the digital X-ray machine be coordinated with the Ministry of Health or the relevant hospital authorities. In addition to disinfectants, should buy chlorine-free but ionized disinfection. Ionized disinfectants are being produced in Mongolia, and it is proposed to study the possibility of purchasing them. NGOs need to study what is lacking and focus on providing what they need.
PCU	N.Tsogzolmaa: This plan has been discussed and implemented since 2019 and has not been completed yet.
NHRC	Ts.Adiyakhishig: I agree with Odgarid. The closure of hotels due to COVID-19 has led to a loss of income for gay and transgender teens, if this information spread into public, could lead to resentment and hatred in society. We have no plans until now when COVID-19 started in January, which is five months and almost six months now. When will this plan be approved and implemented? The PCU should be paying attention to this.
MOH	B.Tsogtbaatar: COVID-19 is a new disease that is affecting people all over the world. However, we are an organization with a plan and target that are committed to operating with funding from the Global Fund. The situation is contributing to this, but it cannot be an explanation for not reaching the plan. Therefore, it is important to explore opportunities to adapt to new situations. There is no doubt that the MATA is malfunctioning, not to mention delivering drugs at home, and even campaigning at home is prohibited. However, I think we are consulting with the relevant committee and district doctors on how to deliver the medicine to these people without interruption. I understand that the process of questionnaire detection is becoming very difficult, and I wonder if there is a need. During PCU presentation, it is mentioned that the election will take place on June 24. What does it have to do with this process? Please do not have such an unprofessional attitude in the future.
Trade Union	B.Myagmar: Thank you for your comments and presentations. My main concern is that the funding issue, which used to be a problem, but it is normal, with the exception of COVID-19 and the election, should focus more on achieving our target, it is very low achievement that 21 out of 200 detections until today. We need to work hard on all sides, including the Ministry of Health, the PCU and the branch recipients. This is a recommendation, not a critique. We did not cut or stop the funding related to the current operation, just re-programming some fund due to COVID-19 which comes from exchange rate differences and supply savings. Therefore, I would like to conclude that these decisions were made without affecting the funding of the CCM and other sectors, and that you should incorporate the suggestions and recommendations of the CCM members into your activities.

Suggestion(S) *Summarize the answer in the section below*

- Expand sample transportation;
- Coordinate the operation of digital X-ray machines with the Ministry of Health and relevant hospital authorities;
- In addition to disinfectants, should buy chlorine-free but ionized disinfection. Investigate the production and purchase of ionized disinfectants in Mongolia;
- In areas where food is provided and public services are lacking, NGOs should investigate what is lacking and provide them with what they need;
- Immediate approval and presentation of the COVID-19 response plan;
- Exploring opportunities to adapt to new situations;
- Consult with relevant committee and district physicians on how to deliver patients' medications without interruption;
- Focus on good core operations, not to mention COVID-19 and elections;
- Achieve the criteria by working hard on both sides, such as the Ministry of Health, PCU and branch recipients.

DECISION(S) *Summarize the decision in the section below*

DECISION MAKING			
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS
	VOTING		VOTING METHOD (Place 'X' in the relevant box)
			SHOW OF HANDS
			SECRET BALLOT
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION>
		ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION>	
		ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >	
*Consensus is general or widespread agreement by all members of a group.			
AGENDA ITEM #3	Presentation about the Global Fund C19M		
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)			
None			
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>			No
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED			
Presentation about the Global Fund C19M			
CCM coordinator B.Oyundari and MOH specialist Kh.Ulzii-Orshikh has introduced the presentations. /Appendix №4, 5 /			
Brief introduction			
<ul style="list-style-type: none"> The new mechanism, C19RM, aims to ensure the sustainability of the HIV and TB program and fighting COVID-19 and to improve the health care system as a matter of urgency. C19RM raised \$ 500 million of funding Countries can receive up to 10% of financial support for the 2020-2022 from the C19RM mechanism This will be deducted from the program funding (-5%) 			
For Mongolia:			
Submit to the Global Fund before May 31, 2020			
Priority 1: \$ 13,344,330 (\$ 433,690) , equivalent to 3.25% of total funding for 2020-2022			
Priority 2: Priority 1 and project savings of 5% minus the request of \$ 382,358			
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM			
<i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>			
Trade Union	B.Myagmar: In the case of Mongolia, an additional 10% of the new GF mechanism C19M, can be used to deduct program funding and receive 5% funding. I would like to ask key members opinion of the CCM, such as the World Health Organization and the Ministry of Health.		
MOH	B.Tsogtbaatar: The \$ 171,560 funding we approved earlier is very helpful, although we do not see any direct benefits yet. GF giving us another opportunities, and the demand will increase in the future. We are currently implementing preventive measures well, but now we are faced with the problem of rapid diagnostics and two issues of rapid treatment of the patients. The government and the World Health Organization have invested high amount of funding support in diagnostics, but we have running out of resources now. Diagnostics are currently in high demand in all countries, so the price has not dropped significantly. There are two types of diagnostics: Basic diagnostics and Specific diagnostics. Specific diagnostics are being funded by the World Health Organization. According to the Minister of Health, there is a need for a total of 50,000 basic diagnostic kits, which about 20,000 we have requested from GF to support.		
Trade Union	B.Myagmar: If the Minister of Health has requested additional funding from the GF new mechanism, MOH should have the same policy, so now let us talk about who will be responsible for this request and which organization. There is a lot of workload in PCU due to COVID-19. So, MOH-Public Health Department Head Enkhzaya, will you take on promises and responsibilities?		
MOH	T.Enkhzaya: I agree with Tsogtbaatar. The Ministry of Health is in charge of diagnostics, masks and disinfectants, so it will probably continue to do so. In terms of document processing, our department is ready to cooperate in all aspects.		
Trade Union	B.Myagmar: The Ministry of Health has requested to develop a document to receive additional funding from the GF new mechanism. Let CCM members to vote on this issue.		

MEF	Kh.Ganbaatar: I am fully support the issue of obtaining additional funding from GF related to COVID-19. However, by May 31, all documents need to be prepared and submitted. Basically, it needs to be processed within 5 working days. Therefore, there is an urgent need to include additional language experts and to draw inspiration from other model projects submitted by foreign countries.
Trade Union	B.Myagmar: I would like to ask approval from the CCM members to send our request for both of the two priorities of GF new C19M mechanism: \$ 1: 433,690 and \$ 2: 382,358.
NSC	J.Munkhjargal: I am refusing. This is because the Gene expert's nominal test kit includes only 4, 4 samples, which is not biosafety compatible. If you get the WHO-recommended test, I will support it.
MOH	B.Tsogtbaatar: We are talking about getting a PCR test, not a Gene Expert test, which is a test recommended by the World Health Organization. There are no nominal diagnostics of any brand.
RO	J.Odgarid: During last 84 th CCM Zoom and Executive Committee meetings, we have requested all of this new additional funding. We do not have much time now. Therefore, the Ministry of Health should write that project and calculate the results, and we are ready to cooperate if you need our support.
Trade Union	B.Myagmar: Odgarid member made an important suggestion. Since we have this opportunity to receive additional funding, we should apply. I believe that this should be incharge by one person. Therefore, it would be right to assign this task to Mr.Tsogtbaatar.

DECISION(S) *Summarize the decision in the section below*

1. Send request for **Priority 1-\$ 433,690** and **Priority 2-\$ 382,358** to the GF new C19M mechanism
2. The Ministry of Health will write the project.

DECISION MAKING

MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING	X	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS	X
				SECRET BALLOT	
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF THE DECISION</u> >		14/15
			ENTER THE NUMBER OF MEMBERS <u>AGAINST THE DECISION</u> >		
*Consensus is general or widespread agreement by all members of a group.			ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >		

AGENDA ITEM #4

Election of CCM Chair

CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

None

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>

No

SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM

Please summarize the respective constituencies' contributions to the discussion in the spaces provided.

Trade Union	B.Myagmar: Let's discuss the issue of electing a new CCM chair. When I first became a member of the CCM in 2017, Ms. Munkhtsetseg took maternity leave and ask me to work as temporarily. After that, Munkhtsetseg started working, but she wanted me to continue working. Although my term of CCM chair has expired, CCM members requestd from me to work until submission of a new project and the re-programming funding for COVID-19. CCM coordinator Oyundari will present information on the candidates for the new CCM chair.
CCM	B.Oyundari: The issue was supposed to be discussed at the 84th meeting held on May 11, 2020 using Zoom application, but it was postponed to be discussed at this meeting and the Secretariat was instructed to get the name of the candidates by May 18. Accordingly, two members were nominated. (Relevant provisions of the CCM Charter related to the election of the CCM Chairman were introduced to the members).
Trade Union	B.Tsogtbaatar: Since the CCM members are fully assembled, there is an opportunity to choose candidate from this meeting hall.
NGO	G.Nyampurev: As for me, I would like to nominate Kh.Ganbaatar, Director of the MEF, because he has enough working experience and leadership skills.
MOH	B.Tsogtbaatar: The proposal has been registered. There are 3 candidates in total. 1. J. Odgarid 2. B. Damdindorj 3. Kh.Ganbaatar
Trade Union	B.Myagmar: Are there any other nominations? If not, the candidacy process is closed now. Please introduce yourself for 3 candidates.
Candidates	1. J. Odgarid

	2. B. Damdindorj 3. Kh.Ganbaatar has introduced themselves to CCM members.			
Trade Union	B.Myagmar: Ballot paper has been provided to the CCM members which is in the folder given, write the name of the candidate that you are choosing for new CCM Chair and put it into the ballot box, please.			
Answer(S) <i>Summarize the answer in the section below</i>				
DECISION(S) <i>Summarize the decision in the section below</i>				
The CCM Chair was elected by secret ballot from among all CCM members who have attended 85 th CCM Meeting, and the results were announced in front of all members. 1. J. Odgarid-4 votes 2. B. Damdindorj-0 votes 3. Kh.Ganbaatar was elected as the next CCM chair with 11 votes.				
DECISION MAKING				
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS	
	VOTING	X	VOTING METHOD (Place 'X' in the relevant box)	
			SHOW OF HANDS	
			SECRET BALLOT	X
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION >	15
		ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION >		
*Consensus is general or widespread agreement by all members of a group.			ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >	
AGENDA ITEM #5	Other issues			
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)				
None				
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no)>			No	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED				
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM <i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>				
Trade Union	B.Myagmar: CCM Secretariat Coordinator B.Oyundari has submitted a request letter to the CCM Chair. (Attached the request letter). B. Oyundari, Coordinator of the CCM Secretariat, has been working diligently in the past, and with her own resources, she has studied law in addition to her major in International Relations. This Master program was eligible for scholarships, but it was canceled due to COVID-19. Therefore she is asking financial support in her Master study program from the CCM members.			
MEF	Kh.Ganbaatar: Is 5650 euros only for tuition fee or are other expenses included? If that is only tuition fee, there will be additional cost of accommodation and meals, which is also difficult to pay, and if we decide to support it, I suggest her to include it together.			
Trade Union	B.Myagmar: She has only asked for tuition fee support. She will cover the other expenses by herself.			
NGO	G.Nyampurev: Do we have funding? Do CCM members also have such an opportunity?			
Trade Union	B.Myagmar: B.Oyundari have studied the possibility of funding. There are \$ 7,000 in funding for an international conference and training should held in July.			
NSC	J.Munkhjargal: We have worked with B.Oyundari for many years. If possible, I would like to support her.			
NHRC	Ts. Adyaakhshig: Will there be a problem with spending the planned expenses on other things? If not, I will support it.			
Trade Union	B.Myagmar: There will be no problem if the CCM members support it. This will be further reviewed and approved by the Global Fund. The final decision will made by Global Fund.			
NGO	Ch.Semjidmaa: I think the main thing is to make an agreement to return to work after studying.			

Trade	B.Myagmar: The new CCM chair will make an agreement with CCM coordinator B.Oyundar. Let's vote on whether to support on her tuition fee.				
Answer(S) <i>Summarize the answer in the section below</i>					
DECISION(S) <i>Summarize the decision in the section below</i>					
For the request of CCM Coordinator B. Oyundari, all CCM members have agreed to provide CCM's open funding of \$ 7,000 to support her one-year Master's program to study in Italy.					
DECISION MAKING					
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	X	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS		
	VOTING	X		VOTING METHOD (Place 'X' in the relevant box)	
				SHOW OF HANDS	X
				SECRET BALLOT	
				ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION >	15/15
		ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION >			
		ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u> >			
*Consensus is general or widespread agreement by all members of a group.					
SUMMARY OF DECISIONS & ACTION POINTS					
AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW		KEY PERSON RESPONSIBLE	DUE DATE	
AGENDA ITEM #1	The implementation of the decisions of the previous meeting was presented		CCM Secretariat		
AGENDA ITEM #2	<ul style="list-style-type: none"> • Expand sample transportation; • Coordinate the operation of digital X-ray machines with the Ministry of Health and relevant hospital authorities; • In addition to disinfectants, should buy chlorine-free but ionized disinfection. Investigate the production and purchase of ionized disinfectants in Mongolia; • In areas where food is provided and public services are lacking, NGOs should investigate what is lacking and provide them with what they need; • Immediate approval and presentation of the COVID-19 response plan; • Exploring opportunities to adapt to new situations; • Consult with relevant committee and district physicians on how to deliver patients' medications without interruption; • Focus on good core operations, not to mention COVID-19 and elections; • Achieve the criteria by working hard on both sides, such as the Ministry of Health, PCU and branch recipients. 		PCU, MATA, Youth Health NGO		
AGENDA ITEM #3	<p>Additional funding for the newly established Global Fund C19M mechanism for COVID-19:</p> <p>Priority 1: \$ 13,344,330 (\$ 433,690), equivalent to 3.25% of total funding for 2020-2022</p> <p>Priority 2: Priority 1 and minus 5% of the project cost savings, the remaining 2 proposals for \$ 382,358 were approved by 14 of the 15 members present at the 85th CCM Meeting.</p> <p>The project will be developed by Mr B.Tsogtbaatar, Head of the Public Administration Department of the Ministry of Health and CCM Vice-chair, in cooperation with the Pharmaceutical Industry and Technology Department and the Public Health Department of MOH, and will be sent to the Global Fund before May 31, 2020.</p>		MOH, CCM Secretariat		
AGENDA ITEM #4	<p>The total of 3 members were nominated for the new CCM Chair. 15 CCM members have participated in the voting by secret ballot, and the results were counted in front of all members.</p> <p>1. J. Odgard-4 votes</p> <p>2. B. Damdindorj-0 votes</p> <p>3. Kh.Ganbaatar was elected as the next CCM chair with 11 votes.</p>		CCM members		

OTHER ISSUE	CCM Coordinator B.Oyundari has given request to CCM chair for asking financial support for the one year Master program`s tuition fee and it is introduced to CCM members. All 15 CCM members present at the meeting was supported and approved. CCM Chair will make an agreement with CCM Coordinator B.Oyundari, and agreed to reimburse the tuition fee to the Global Fund if she will not return to CCM Secretariat work in Mongolia after her Master study in Italy.		
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To add another 'Agenda Item' highlight the entire row corresponding to the last 'Agenda Item #' in the table. Right click on the mouse and select the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows.

NEXT MEETING (INCLUDES OUTSTANDING AGENDA ITEMS NOT COMPLETED DURING CURRENT MEETING)	
TIME, DATE, VENUE OF NEXT MEETING (<i>dd.mm.yy</i>)	
PROPOSED AGENDA FOR NEXT MEETING	WRITE THE PROPOSED AGENDA ITEMS IN THE SPACES PROVIDED
AGENDA ITEM #1	
AGENDA ITEM #2	
AGENDA ITEM #3	

To add another 'Agenda Item' highlight the entire row corresponding to the last 'Agenda Item #' in the table. Right click on the mouse and select the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows.

SUPPORTING DOCUMENTATION	Place an 'X' in the appropriate box	
	Yes	No
ANNEXES ATTACHED TO THE MEETING MINUTES		
ATTENDANCE LIST	X	
AGENDA	X	
OTHER SUPPORTING DOCUMENTS	X	
APPENDIX 1-10	X	
IF 'OTHER', PLEASE LIST BELOW:		
Grant presentation from NCCD and MOH.		

CHECKLIST (Place 'X' in the relevant box)			
	YES	NO	
AGENDA CIRCULATED ON TIME BEFORE MEETING DATE	x		The agenda of the meeting was circulated to all CCM members, Alternates and Non-CCM members <u>2 weeks</u> before the meeting took place.
ATTENDANCE SHEET COMPLETED	x		An attendance sheet was completed by all CCM members, Alternates, and Non-CCM members present at the meeting.
DISTRIBUTION OF MINUTES WITHIN ONE WEEK OF MEETING	x		Meeting minutes should be circulated to all CCM members, Alternates and non-members within <u>1 week</u> of the meeting for their comments, feedback.
FEEDBACK INCORPORATED INTO MINUTES, REVISED MINUTES ENDORSED BY CCM MEMBERS*	x		Feedback incorporated into revised CCM minutes, minutes electronically endorsed by CCM members, Alternates and non-members who attended the meeting.
MINUTES DISTRIBUTED TO CCM MEMBERS, ALTERNATES AND NON-MEMBERS	x		Final version of the CCM minutes distributed to CCM members, Alternates and Nonmembers and posted on the CCM's website where applicable within <u>15 days</u> of endorsement.

* Often CCM minutes are approved at the next meeting. For many months can pass before the next scheduled meeting, electronic endorsement of the CCM minutes is considered to be a more efficient method for effective meeting management.

GLOSSARY FOR ACROYNMS USED IN THE MINUTES:	
ACROYNM	MEANING
MOH	Ministry of Health

CCM	Country Coordinating Mechanism
GO	Governmental organization
NGO	Non-Governmental organization
WHO	World Health Organization
UN	United Nations
PCU	Project Coordinating Unit
NHRC	National Human Rights Commission
NSC	National Security Council
MNUMS	Mongolian National University of Medical Sciences
MECS	Ministry of Education, Culture and Science
RO	Religious Organization
UNFPA	United Nations Population Fund
MEF	Mongolian Employer`s Federation

To add an additional 'Acronym', highlight the entire row corresponding to the last 'Acronym' in the table. Right click on the mouse and select the 'Insert' menu item, then select the 'Insert Rows Below' option. Repeat as necessary to add additional rows

CCM MINUTES APPROVAL:

APPROVED BY (NAME) >	Kh.Ganbaatar	DATE >	May 27, 2020
	CCM Chair	SIGNATURE >	

CCM MINUTES REVIEWED BY:

TYPE / PRINT NAME >	B.Oyundari	DATE >	May 27, 2020
FUNCTION>	CCM Secretariat Coordinator	SIGNATURE >	

CCM MINUTES PREPARED BY:

TYPE / PRINT NAME >	T. Batchimeg	DATE >	May 27, 2020
FUNCTION>	CCM Secretariat assistant	SIGNATURE >	