CLM C19RM Technical Assistance Request Form

The investment in Community-Led Monitoring (CLM) for effective C19RM grants supports short-term technical assistance (TA) to strengthen the capacity of communities to gather, analyze and use data for improved availability, accessibility, acceptability and affordability of HIV, TB and malaria services in the context of Covid-19, to integrate CLM in national C19 responses and to document the impact of CLM on C19RM funding priorities.

1. **Applicant details**

|  |  |
| --- | --- |
| Name of organization/entity |  |
| Type of organization/entity[Please check all that apply; what best describes your organization/entity.] | \_\_ Government / government department\_\_ Public health facility\_\_ Private sector health facility or service site\_\_ Civil society organization (CSO)\_\_ Community-based organization (CBO)\_\_ Key population network or organization\_\_ Faith-based organization (FBO)\_\_ Youth organization\_\_ Other, please describe:  |
| Address |  |
| Country |  |
| Main contact person |  |
| E-mail |  |
| Telephone number |  |
| What is your involvement with the Global Fund at country level?  | \_\_ PR\_\_ SR/SSR\_\_ CCM\_\_ CSO / CBO / NGO [ ] [ ]  \_\_ None of the above |
| Date of request  |  |
| Envisaged start date of TA support[[1]](#footnote-1) |  |

1. **Background and rationale**

2.1 Which organizations/entities were involved in preparing this request? *(please list them here; spell out all acronyms and abbreviations)*

|  |
| --- |
|  |

2.2 What is the disease(s) focus of this request? *(please select all that apply)*

\_\_ HIV

\_\_ Tuberculosis

\_\_ Malaria

2.3 Which Global Fund C19RM grant(s) will the TA be linked to? How will the TA strengthen the performance and/or results of the grant?

|  |
| --- |
|  |

1. **Objective(s) and TA needs**

3.1 What is the purpose and objective(s) of the TA request?

|  |
| --- |
|  |

3.2 Which of the following CLM C19RM TA area(s) and activities are you requesting? *(please select all that apply)*

|  |  |
| --- | --- |
| *1. Strengthen the capacity of communities to gather, analyze and use data for improved availability, accessibility, acceptability and affordability of HIV, TB and malaria services in the context of Covid-19* | \_\_ CLM strategy development (including indicator selection, site selection, determining CLM mechanisms and structures)\_\_ CLM protocols and tool development (such as community scorecards, patient satisfaction surveys, resource and budget tracking tools)\_\_ Data triangulation and verification exercises\_\_ CLM database development including software/digitalization \_\_ In-person/virtual training and mentorship on data collection processes, analysis, reporting\_\_ Data quality audits or other quality assurance processes |
| *2. Integrate CLM in national C19 responses* | \_\_ Developing national and local level multi-sectoral partnership plans for sharing data for decision making to increase/improve services and quality\_\_ Communication protocols including establishing bi-directional “feedback loops” to ensure data quickly reaches decision-makers who can use the data to adjust program strategy\_\_ Organizing evidence-sharing meetings with communities and other stakeholders\_\_ Participation in national and local level meetings where CLM data can be shared |
| *3. Advocacy strategy and implementation* | \_\_ Improve/establish CLM advocacy strategies\_\_ Development of advocacy materials based on CLM data\_\_ Organizing advocacy planning and strategy sessions to use CLM data\_\_ Organizing and conducting training sessions on using CLM data for advocacy |
| *4. Document impact of CLM on C19RM funding priorities* | \_\_ Developing written case studies on effectiveness and/or outcomes of CLM interventions for public dissemination – including abstracts for conferences, articles for journals, other materials development.  |
| *5. Other TA/Support* | Please elaborate:  |

1. **Scope of work**

4.1 Please provide details on the expected activities in the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Task/activity**  | **Remarks** (Please distinguish between in-country and desk work) | **No. of expert days**  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total**  |  |

4.2 Please list the key deliverable(s) of the TA.

|  |  |  |
| --- | --- | --- |
| **Key****deliverable(s)** | **Estimated date of delivery** | **Anticipated use of deliverable(s)** |
|  |  |  |
|  |  |  |
|  |  |  |

4.3 Please provide an estimated budget to carry out the TA. Major budget categories have been provided below. Add rows as needed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget category**  | **Number of units** | **Price per unit (USD)** | **Total (USD)** |
| Consultant Fees |
|  |  |  |  |
|  |  |  |  |
|  |  | Subtotal fees |  |
| International Travel Expenses |
|  |  |  |  |
|  |  |  |  |
|  |  | Subtotal intl travel |  |
| Local Travel Expenses |
|  |  |  |  |
|  |  |  |  |
|  |  | Subtotal local travel |  |
| Workshop/Meeting Expenses |
|  |  |  |  |
|  |  |  |  |
|  |  | Subtotal wkshop/mtgs |  |
| COVID-19 Preventive Measures (masks, hand sanitizers) |
|  |  |  |  |
|  |  |  |  |
|  |  | Subtotal COVID-19 |  |
| **TOTAL TA BUDGET** |  |

4.4 What language skills of expert(s) as well as other qualifications or expertise do you consider important for this TA?

|  |
| --- |
|  |

1. **Other information**

5.1 Have you liaised with your CCM regarding this TA request? *(please indicate Yes/No)*

If Yes, please provide details of people that you consulted and a summary of your discussion (when, liaising process).

|  |
| --- |
|  |

5.2 Have you liaised with the Global Fund Country Team and/or the Community, Rights and Gender (CRG) department regarding this TA request? *(please indicate Yes/No)*

If Yes, please provide details of people that you contacted and a summary of your discussion.

|  |
| --- |
|  |

5.3 Has your organization received support from any [CRG Regional Platform](https://www.theglobalfund.org/media/10393/crg_regionalplatforms_contactdetails_en.pdf) to complete this application? *(please indicate Yes/No)*

If Yes, please indicate which Regional Platform, and provide details of people that you contacted and a summary of the support provided.

|  |
| --- |
|  |

5.4 Has your organization/entity applied for similar TA from other CLM-related TA programs? (e.g. UNAIDS, Stop TB Partnership, RBM Partnership, other donors)? *(please indicate Yes/No)*

If Yes, please indicate which other TA program(s), and provide details of people that you contacted and the result of the TA request.

|  |
| --- |
|  |

5.5 How did your organization/entity find out about the CLM C19RM TA opportunity?

|  |
| --- |
|  |

5.6 Please share any other relevant information that might support this application, such as your preference for one of the three pre-approved CLM C19RM TA providers[[2]](#footnote-2) as appropriate.

|  |
| --- |
|  |

Please submit your completed TA request form to CLMTA@theglobalfund.org.

We thank you for your interest in CLM C19RM TA.

We will review your request internally and get back to you soon.

1. Please note that the mobilization of technical assistance may take at least two weeks from the date of submission. [↑](#footnote-ref-1)
2. 1. Community-Led Accountability Working Group (CLAW), led by Health Gap and Asia Catalyst with Advocacy Core Team (ACT) of Zimbabwe, the Public Policy Office of amfAR, O’Neill Institute for National and Global Health Law at Georgetown University.

2. Eastern Africa National Networks of AIDS and Health Service Organizations (EANNASO) with Asia Pacific AIDS Service Organizations (APCASO) and Alliance Technical Assistance Centre (ATAC) in Ukraine.

3. Community Data for Change Consortium (CD4C) led by ITPC Global with MPact, African Men for Sexual and Rights (AMSHeR), Asia Pacific Coalition for Men’s Sexual Health (APCOM), Caribbean Vulnerable Communities (CVC), Eurasian Coalition on Health, Rights, Gender and Sexual Diversity (ECOM), Global Coalition of TB Activists (GCTA), ITPC EECA and ITPC WCA. [↑](#footnote-ref-2)