

RBM/B16/2020/MIN.1 – CORRIGENDUM.1

Geneva, 24 January 2021

16TH MEETING OF THE RBM PARTNERSHIP TO END MALARIA BOARD - MINUTES

Videoconference, Tuesday 1 and Wednesday 2 December 2020

DAY 1

ATTENDANCE LIST

See Annex 1

The Board Chair welcomed the participants to the 16th virtual Board Meeting.

I	ADOPTION OF THE PROVISIONAL AGENDA OF 4 NOVEMBER 2020	RBM/B16/2020/DP01
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See Annex 2

Noting that the pre-reads had been published later than stipulated in the Bye-Laws, the Board Chair requested the approval of their acceptance. The Board unanimously accepted the pre-reads.

For ease of logistics, the Board Chair proposed to rearrange the provisional agenda items as follows:

- Item V became Workplan and Budget 2021
- Item VI became RBM Partnership Strategic Plan 2021-2025
- Item VII became Update on Data from PMI
- Item VIII became AOB
- Item IX became Concluding Remarks
- Item X became Hosting Report Review – *closed session*
- Item XI became Annual CEO Performance Assessment – *closed session*

The Board Chair recalled that to preserve confidentiality and avoid any conflict of interests, the *Hosting* discussion would be for Board Members, Members of the Board Hosting Working Group and a select Team from the Secretariat only, and without the ex officio UNOPS Board Member. The *Annual CEO performance assessment* would also be a closed session for Board Members only.

The Board Chair requested volunteers for the committee to support drafting efforts for the Board meeting decision points. Dr Mpanju-Shumbusho and Dr Reddy volunteered, with support from Ms Goldman-Van Nostrand and Ms Wallace.

Decision Point 01 – Adoption of the agenda

The Board of the RBM Partnership to End Malaria adopted the provisional agenda RBM/B16/2020/DP01 with the following changes:

Item V became Workplan and Budget 2021

Item VI became RBM Partnership Strategic Plan 2021-2025

Item VII became Update on Data from PMI

Item VIII became AOB

Item IX became Concluding Remarks

Item X became Hosting Report Review – *closed session*

Item XI became Annual CEO Performance Assessment – *closed session*

a Apologies

The Board Chair confirmed that no apologies had been received.

b Declarations of Interest – Status and Update of 4 November 2020

RBM/B16/2020/RP01

The Board Chair recalled that the Declarations of Interest were valid one year unless there was a change in circumstances. The Board Chair asked if any Board Members had anything to declare.

Dr Roses informed the Board of an additional responsibility, from April 2020, as WHO Special Envoy for COVID-19 for the Latin American and Caribbean region.

Dr Chizema informed the Board that she was an employee of the African Leaders Malaria Alliance (ALMA) and that ALMA was a recipient of funding for various workshops and meetings to implement its activities.

II ADOPTION OF THE 15TH BOARD MEETING MINUTES AND SUMMARY OF BOARD DECISIONS AND VOTING SINCE LAST MEETING OF 4 NOVEMBER 2020

RBM/B16/2020/RP02

The Board Chair recalled that one decision had been made electronically since the meeting in May 2020 where the Board approved the nominations of Drs Chizema and Dare to the RBM Board, and reconfirmed the appointment of Dr Roses for the second term from December 2019 to December 2022 inclusive.

The RBM Partnership to End Malaria Board took note of this information and adopted the 15th Board Meeting minutes.

III UPDATES OF 18 NOVEMBER 2020

RBM/B16/2020/RP03

The Board Chair invited the CEO to report on the Secretariat activities since the last Board meeting.

See Annex 3

By means of slides, **the CEO** shared the following updates since the last meeting.

RBM Partnership Strategic Plan 2021-2025

The CEO recalled that 2020 was the final year of the first strategic plan since the relaunch of the RBM Partnership in 2017, and added that the development of the next strategic plan in 2020 for 2021-2025 was timely during one of the most challenging times for the global health – the COVID-19 pandemic. He stated that the new strategy's ambitious goals would need to be balanced vis-à-vis the lean Secretariat via prioritisation of activities to ensure successful delivery.

The CEO thanked all Board Members for their continuous active engagement, inputs and guidance for the development of the new RBM Partnership Strategic Plan.

RBM's fight against malaria during the COVID-19 pandemic

The CEO stressed that RBM's response to the pandemic had continued throughout 2020 to ensure that the majority of planned campaigns were on track.

RBM global malaria dashboard

The CEO mentioned that a soft technical launch of the RBM global malaria dashboard had taken place on 10 November, and confirmed that the actual public launch would be held in December 2020 with the aim to improve high-level partner coordination and help address challenges in countries using data.

RBM Secretariat recruitments approved by the Board:

Deputy Chief Executive (D-1): assessment of shortlisted candidates will commence in the second half of December 2020.

Operations Manager (P-4): foreseen start date of January 2021.

Data Initiative Manager (P-4): foreseen start date of January 2021.

Monitoring & Evaluation Specialist (P-3): foreseen start date of January 2021.

Board Support Associate (G-7): vacancy announcement closed on 26 November 2020, UNOPS is coordinating the recruitment process directly with the Board Leadership.

2021 Workplan

The CEO stated that the 2021 workplan contained several functions that were new to the RBM Secretariat's scope of work. Notably, RBM would strengthen the Partnership via identification of new partners and optimising RBM's reach; launching the global malaria data dashboard to advocate for greater transparency to support decision-making; and building on the previous work on innovation and access to focus on how RBM can best support the inclusion of innovative products in the malaria fight.

The Board Chair thanked the CEO for the comprehensive update and congratulated the CEO and the Secretariat Team for these important accomplishments in the challenging environment. The Board Chair opened the floor for questions and comments.

The Board Members shared the following comments:

- congratulated the Secretariat Team for the hard work to mitigate the negative impact of the COVID-19 on malaria and ensure the continuation of malaria programmes;
- noted the excellent progress made on the global malaria data dashboard and thanked all involved for their hard work;
- stressed the continued importance of inserting malaria narrative into high-level dialogues to keep malaria high on the political agendas;
- highlighted the need to focus on where the RBM Partnership adds value and using partners to avoid duplication of efforts.

After thanking Board Members for their comments, **the Board Chair** invited the PC Co-chairs to present the updates since last meeting.

The RBM Partnership to End Malaria Board took note of this information.

b Updates from Partner Committees

- CRSPC
- SCPC
- ARMPC

Board dialogue with Partner Committee Co-chairs and Managers

See Annex 4

By means of slides, on behalf of CRSPC, **Drs Olumese and Renshaw** shared the following updates:

- in 2020 countries were able to conduct successful LLIN campaigns and other malaria interventions thanks to countries' leadership;
- more than 20 million children protected from malaria through seasonal malaria prevention, and about 200 million nets are expected to be distributed at the end of 2020;
- CRSPC supported 49 countries with Global Fund applications to ensure submission within the prescribed deadlines and 98% of the countries successfully passed to the grant making stage; this support enabled countries to secure USD 3 billion for malaria for the next 3 years.
- In the process of developing the Global Fund applications and virtual mock TRPs, connectivity challenges to attend these virtual convenings were continuing for some countries;
- exceptionally heavy workloads experienced by CRSPC whilst trying to address malaria bottlenecks relating to COVID-19;

- challenges experienced due to the lack of “malaria voice” in the country coordinating mechanisms, which lead to significant resource movements from malaria allocations to Resilient and Sustainable Systems for Health (RSSH) leaving major gaps in essential malaria services.
- implementation support was provided to 30 countries (22 with direct consultant support) to re-plan their LLIN campaigns from fixed point to house to house approach in the context of the COVID-19 pandemic.
- tracking supply availability in countries (ACTs, RDTs, artesunate, LLINs, IRS, SMC commodities) and working to troubleshoot filling of gaps as they arose including airlifting of commodities and splitting deliveries where required. In this regard, CRSPC tracking tool was developed and was shared on RBM website on a weekly basis.
- to mitigate the effect of COVID-19 on malaria regular check-ins with countries continued for real-time problem solving;
- ongoing political advocacy and concertive partnership had been ensured to remove bottlenecks in delivering commodities and avoiding stockouts;
- in collaboration with WHO, support to 18 countries had been successfully provided to conduct malaria programme reviews and/or to develop national malaria strategic plans and ensure highest impact;
- more than 95% of endemic countries had been able to mobilise sufficient resources for LLIN, IRS, SMC and case management gaps;
- country support to implement HBHI was continuing;
- 4 virtual sub-regional malaria programmes and partners meetings had been organised which enabled the countries to share best practices, and also present their 2021 TA needs;
- strong coordination between Partner Committees had been ensured.

The Board Chair invited the SCPC Co-chairs to present their update.

See Annex 5

By means of slides, on behalf of SCPC, **Ms Fishman** and **Ms Djibo** shared the following updates:

- to shape the global narrative, SCPC had continued to communicate the progress and challenges in the malaria fight whilst reinforcing the overarching vision of ending malaria and leveraging the strengths of the RBM Partnership;
- against the backdrop of the pandemic, the RBM Partnership aligned partners around the importance of continued progress and investments in malaria fight, which resulted in a five-fold increase in media mentions in 2020;
- events and campaigns had been shifted from physical to virtual format on account of COVID-19, nonetheless these were effective in engaging partners at all levels, including new malaria champions and advocates across all regions;
- Zero Malaria Starts with Me campaign was being further expanded, with 7 new countries joining the movement in 2020, and partners beginning to use it outside of Africa;
- Zero Malaria Business Leadership Initiative was launched in July 2020 to engage with small and medium enterprises and would be piloted in several countries where partners will take it forward, similarly to the End Malaria Councils and Funds;
- SCPC continued to work on connecting malaria to the broader sustainable development agenda via the political commitment to malaria and an emerging gender-focused initiative;

- sustainability of malaria advocacy had been enhanced at global and country levels via the provision of platforms, branding and narrative adapted to various sectors and new demographics (e.g. youth).

The Board Chair invited the ARMPC Co-chairs to present their update.

See Annex 6

By means of slides, on behalf of ARMPC, **Ms Ivanovich** and **Ms Lucard** shared the following updates.

Despite ARMPC workplan being adapted to the COVID-19 environment, ARMPC contributed to:

- coordination and collaboration with global advocacy partners;
- promotion of multisectoral partnerships;
- development of new materials for malaria advocacy such as the Multisectoral Advocacy Guide;
- building capacity for the global civil society advocacy network;
- ensuring donor outreach for resource mobilisation such as the creation of the rice, agriculture and malaria webinar series with partners;
- the growing strength of the Partnership including collaboration between all Partner Committees.

After thanking the Partner Committees for their incredible work during the unprecedented times of COVID-19 pandemic, that gives the RBM Partnership real depth and impact, **the Board Members** provided the following comments:

- noting that some countries had redirected malaria funds, RBM should consider tracking the final allocation in the RBM global malaria dashboard;
- it would be valuable to share the CRSPC successes on the tailoring of grant applications to countries with the advocacy working group to leverage on good examples;
- malaria partners' voice should be further strengthened by bringing malaria issues into the agendas of the key stakeholders;
- the multi-sectoral approach was applauded and, notably, working with various partners to bring malaria into large movements such as the *Healthy Cities* and the *Safe World*, et al;
- since Country Coordinating Mechanisms (CCMs) are not designed to discuss RSSH and countries do not have a directorate for health systems strengthening, the CCM set-up may need revision to benefit the various disease areas and, notably, the impact on malaria;
- as RBM communication materials on malaria in the Global Fund are developed, it is important to discuss the messaging with partners to ensure that the content resonates and to facilitate tailoring;
- notably, it would be helpful to organise advance briefings with Board Members that attend the Global Fund Board meetings to help strengthen the malaria position in these fora;
- noted the continuous cross-fertilization between Partner Committees to ensure alignment.

The RBM Partnership to End Malaria Board took note of this information.

The Board Chair invited Mr Daly to present an update from the End Malaria Council.

c Update from the End Malaria Council

See Annex 7

By means of slides, **Mr Daly** reported that the End Malaria Council (EMC) had recently held its annual meeting with the focus on the COVID-19, where the CEO had also been present. He explained that the EMC model had been shifted to include an Advisory Committee comprised of partner institutions, and confirmed that there would be some changes in the EMC membership going forward to ensure the necessary impact.

Mr Daly confirmed that the EMC 2021 focus would be on the three key areas: 1) data for decision-making, which builds on RBM's work on the data platform 2) financing for malaria and health and, notably, how to increase and improve investments for malaria, and 3) how to drive increased investments for community health workers to ensure the delivery of essential services for malaria and other diseases.

The CEO echoed Mr Daly's comments and added the last EMC annual meeting had also been practical and concentrated on how countries could be better supported and how the resources could be better allocated.

After thanking Mr Daly, **the Board Members** shared the following comments:

- community Health Workers workstream is critical for malaria, COVID-19 and other pressing public health priorities;
- taking into consideration the slowdown in the reduction of malaria cases, implementation of regional strategy plans should be ensured to maximise impact.

The RBM Partnership to End Malaria Board took note of this information.

The Board Chair invited Dr Alonso to present an update on the malaria landscape from WHO.

d Update on malaria landscape from WHO

Dr Alonso recalled that the World Malaria Report had been launched the previous day, which was a special edition looking back at the key events and milestones that shaped the global malaria response over the last 20 years, and invited Board Members to consult the report.

Notably, Dr Alonso reported that 1.5 billion of malaria cases and 7.6 million of malaria deaths had been averted mostly in the WHO African region, which contributed to one of the biggest returns on investment in global health since the beginning of the millennium.

He stated that there had been a 29% reduction in global malaria case incidence between 2000 and 2019 and less than 2% reduction in malaria case incidence between 2015 and 2019. Dr Alonso confirmed that, as per the World Malaria Report 2020, the current estimates of global malaria case incidence showed that the current progress was not on track to meet the global agreed targets. He was pleased to highlight that the global progress in eliminating malaria between 2000 and 2019 included 21 countries to eliminate malaria since 2000, with the People's Republic of China and El Salvador being the latest countries to submit official requests to WHO for malaria-free certification.

Dr Alonso stated that despite progress in the malaria prevention commodities, significant gaps remained. He added that using data to define different parameters that contribute to heterogeneity and malaria transmission intensity, morbidity, mortality and access to health facilities, et al, would significantly improve the service deliveries and ensure the maximum impact.

After thanking Dr Alonso, **the Board Members** shared the following comments:

- applauded the overall incredible progress made;
- WHO World Malaria Report 2020 was significant and reemphasized the risks that the malaria community faces in getting behind on progress;
- good lessons learnt on sustaining malaria efforts amidst the COVID-19 pandemic and how the malaria community was able to work together in a remarkable way, which should be shared widely;
- no time for complacency during the current challenging environment.

The RBM Partnership to End Malaria Board took note of this information.

Before moving to the Finance Committee report agenda item, on behalf of the RBM Partnership Board, and taking into account Mr Nishimoto was stepping down from the RBM Board immediately after the 16th Board Meeting, **the Board Chair** reiterated the sincere gratitude to Mr Nishimoto for his outstanding leadership as Chair of the Finance Committee and as valuable RBM Board Member and stressed the hope that Mr Nishimoto would continue being a Partner in the fight against malaria.

Applause

The Board Chair also welcomed Dr Reddy to his new role as the Chair of the Finance Committee at the conclusion of the 16th Board Meeting and until April 2021 to align with his term of office as RBM Board Member.

IV GOVERNANCE

The Board Chair invited Mr Nishimoto to present the Finance Committee report.

a	Finance Committee report of 23 November 2020	RBM/B16/2020/RP04
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Mr Nishimoto recalled that the last meeting of the Finance Committee had been held on 6 November 2020 during which the RBM audit was discussed, and the RBM financial report, 2021 Budget and Workplan and the updated Risk Log reviewed. He confirmed that the Finance Committee was satisfied with the contents of the respective documents and tasked the Secretariat to share this information with Board Members. With permission from the Board Chair, he invited the CEO to commence the presentation of the Finance Committee report, and invited Board Members to ask questions and share comments afterwards.

The CEO recalled that the Financial Committee report referred to RBM's financial situation as at 30 September 2020 and contained the actual costs up to September 2020 with projected expenditure to December 2020. He explained that it was extracted directly from the UNOPS financial management system and had been reviewed and approved by UNOPS before transmission to the Finance Committee in the format and the template previously approved by the Board. He reiterated that it was presented to the Finance Committee in November

2020 and covered the RBM's financial status, as well as income versus expenditure as per strategic objectives, and the 2021 funding forecast.

The CEO recalled that there were two reserves: 1) the sustainability reserve and 2) the strategic initiative reserve and confirmed that neither one had been used to date.

He confirmed that the projected total expenditure for 2020 was USD 10.2 million, leaving the balance of USD 7.2 million in commitment to carryover to 2021. He reported that for the 2021 funding forecast, RBM had recently signed an agreement with the Bill and Melinda Gates Foundation to cover the end of 2020 and a part of 2021. He expressed the hope to also sign new agreements for 2021 with USAID/PMI, a multi-year agreement with the Bill and Melinda Gates Foundation, the Global Fund and the Crown Prince Court of Abu Dhabi.

Referring to the updated Risk Log, the CEO recalled that the new risk had been added with regards to the RBM's IT platform and confirmed that RBM would migrate its IT system tools to UNOPS before June 2021. He also highlighted the two increased significant risks related to the RBM structure alignment with the new Strategic Plan in terms of staffing, and the RBM's structure not meeting the needs of all partners; and added that the risk related to the development of parallel or alternative mechanisms to RBM had been deleted.

In response to **Board Members**, the CEO explained that the less than expected expenditure related to the COVID-19 pandemic affecting all in-person activities, as well as to some efficiencies gained by increased optimization and synergy between the Partner Committees.

The Board Members expressed their heartfelt gratitude to Mr Nishimoto and his Adviser, Ms Goldman-Van Nostrand for their significant contributions to the work of the RBM Partnership to End Malaria.

Recognising the importance of the Global Fund in malaria investments and in view of the Board discussion on the view to improve the RSSH support, **Board Members** discussed the possibility of convening a joint Board and the RBM Secretariat Working Group to work on aligning positions to feed into the Global Fund's new strategy under development.

The Board Chair invited Messrs Lucas and Dieng, and Ms Chovanova, from the UNOPS Internal Audit and Investigation Group (IAIG), to join the meeting for the 2020 audit report item of the agenda.

b 2020 audit reports of 25 and 27 November 2020

RBM/B16/2020/RP05

Messrs Lucas and Dieng, and Ms Chovanova joined the meeting

Mr Dieng greeted Board Members and stated that his colleague, Mr Lucas, the Director of the IAIG, reported to the UNOPS Executive Director and to the UNOPS Audit Committee. He explained that the IAIG presented its audit activity reports to the UNOPS Executive Board comprising of UNOPS, UNDP and UNFPA.

Further to the pre-reads shared, he confirmed that the IAIG conducted two audits for improvement purposes: 1) internal audit of RBM for 2020 and 2) a follow-up of the audit conducted in 2019. He reported that the RBM audit rating was *partially satisfactory*, with some improvements needed and, notably, those related to RBM's financial management. He highlighted that the IAIG did not come across any misconduct or fraud that would need to be transmitted to the UNOPS Investigations.

He reported that as per the findings of the IAIG RBM audit for 2020, RBM needed to make the following improvements:

- improve the monitoring oversight of the grant expenditure and any payment including that of the Daily Subsistence Allowance (DSA);
- Human Resources (HR): ensure competitive recruitment processes; HR related payments must be thoroughly checked before execution;
- the monitoring and oversight of the grantee process selection needs to be improved via additional transparency in the competition, whilst avoiding any retroactive or post facto payments, as well as thoroughly checking for potential conflicts of interest and ensuring that all declarations are filed in due course;
- the finalisation of the UNOPS hosting arrangements' transition needs to be finalised as soon as possible to ensure RBM programme continuity.

Regarding the follow-up audit for 2019, Mr Dieng reported that the IAIG checked the 14 audit recommendations made in 2019, and confirmed that 11 had been fully implemented, 1 partially implemented and 2 not yet implemented. He highlighted that the UNOPS KPI on the implementation of audit recommendations vis-à-vis UNOPS Executive Board was 18 months, and applauded RBM for implementing 11 out of 14 recommendations in the timeframe of 12 months.

Mr Dieng thanked Board Members, the CEO and the UNOPS colleagues, for their continuous involvement and guidance to improve UNOPS processes.

The Board Chair invited Mr Nishimoto to share his comments on the audit findings, as the Finance Committee Chair.

Mr Nishimoto confirmed that the Finance Committee was pleased to note that no misconduct or fraud had been detected. He stressed that some management controls needed urgent action, and recognised that the audit covered the 2019 period before the new Finance Manager had been recruited. He confirmed that outstanding audit-related action points would be followed up with the help of the Finance Manager. He stressed that the audit findings highlight the importance of having annual audits and that the Finance Committee recommends that these be continued going forward.

Ms Chovanova clarified that the implementation plan included the following recommendations:

- Secretariat needed to improve communications with the Board;
- Secretariat and UNOPS Geneva support team needed to improve communications and, notably, with regards to grants selection and grants financial monitoring, and the organisation of RBM workshops, amongst other improvements detailed in the audit reports.

The Board Members shared the following comments:

- thanked the auditors for the effective work, useful presentation and detailed reports with specific actions;
- thanked Mr Nishimoto and Ms Goldman-Van Nostrand for their hard work and making RBM a stronger and successful partnership.

Messrs Lucas and Dieng, and Ms Chovanova left the meeting

The Board Chair stressed that the audit recommendations must be completed as soon as possible and urged the Secretariat to work with UNOPS to finalise this work promptly.

The Board Chair invited the Board Vice Chair to present the Board rotation update.

c Board rotation update of 27 November 2020 RBM/B16/2020/RP06

The Board Vice Chair recalled that 15 Board Members had been appointed at the same time in 2016 thus presenting a challenge for rotation if after two terms Board Members rotated off at the same time. As per the RBM Partnership Rotation Policy, 1/3 of the Board should be rotated every year since the reinvigoration of the RBM Partnership.

See Annex 8

The Board Vice Chair confirmed that, since in 2022, 9 Board Members are due to rotate off at the same time, it is proposed to seek voluntary candidates to bring forward their rotation. He confirmed that the proposed course of action was presented in the slides.

The Board Vice Chair recalled that the Board membership size had been increased to 17 seats plus 1 ex-officio UNOPS hosting agency seat. He also recalled that the Bye-Laws stipulated that half of the Board should come from malaria endemic countries and regions, and that the Board's aim was to ensure a balance in terms of geographic representation and gender. He confirmed that the process of recruitment needed to commence and that the Board needed to carefully consider the skills' gaps that needed to be filled. For this purpose, it was necessary to swiftly reconstitute the Board Selection Committee (BSC) to launch the recruitment for 2 Board Members to commence their term of office in 2021.

The Board Vice Chair also announced that it was necessary to find a new Board Vice Chair since he was stepping down from the Board in June 2021. As per the previous process, Board Members proposed a nominee from the current Board to the Board Chair and the Board voted on acceptability should there be more than one candidate. He also noted that the Board also needed to consider the succession to the current Board Chair whose term of office would end in the Spring 2022. He invited Board Members to volunteer for the BSC membership, which needed between 3 to 5 members.

The Board Chair invited the Board Vice Chair to present the RBM Board performance and accountability agenda item.

d RBM Board performance and accountability of 27 November 2020 RBM/B16/2020/DP02

The Board Vice Chair recalled that that Bye-Laws stated that the Board was accountable to Partners and public opinion and notably to malaria-endemic communities, and that the Board would seek opportunities to engage and consult with Partners on an ongoing basis; and would establish and regularly update an accountability framework including regular independent published performance reviews of the Partnership itself.

He recalled that the Board had launched a self-assessment tool in late 2018/early 2019, the findings of which had been shared with Board Members as part of the pre-read. He stated that it was necessary to carry out the assessments regularly and recalled that the auditors recommended an independent review. He added that the

Board needed to decide on whether to do another self-assessment, a facilitated assessment or a completely independent review, whilst bearing in mind the associated intensity of work and costs for the latter option.

The Board Members provided the following comments:

- necessity to find a middle ground between a self-assessment - whilst ensuring the due objectivity and rigor - and an expensive and difficult to manage external process;
- recommended to separate the process into 1) self-assessment on Board performance and 2) accountability to the Partnership at large;
- to facilitate the discussions and finalise the recommendations to the Board, it was suggested to create a Board Performance and Accountability Committee (BPAC);
- recommended to proceed with the discussion on Partners' engagement prior to finalising a Decision Point on having a Board Working Group to help put together a process for assessing RBM Board performance.

e	Discussion on Partners' Engagement	RBM/B16/2020/DP03
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See Annex 8

The Board Chair stated that it was necessary to think of ways to engage Partners in a more direct way, and recalled that improving Partner engagement was one of RBM's cross-cutting strategic enablers.

The Board Chair proposed the setting up of a Board Performance and Accountability Committee (BPAC) to study the following questions and develop recommendations, and revert to the Board with suggestions on 1) how to improve Board accountability and 2) increase engagement between the Board and stakeholders, for adoption at May 2021 Board Meeting.

- *What are the key considerations for determining how RBM Partners can meaningfully engage with the Board?*
- *What is the role of Partners in informing proceedings of the Board meeting?*
- *What is the role of partners in engaging with the Board outside of Board meetings?*
- *Partners involved in RBM work engaged through Partner Committees; are Board meetings the right venues for engaging other Partners? Should other arrangements be made?*

The Board Members shared the following comments:

- fully supported all suggestions made;
- it is important to proceed through a governance lens with a sense of proportionality vis-à-vis the implementation;
- neither *Partners* nor *Board accountability* had been well defined and the process to be led by BPAC requires thorough thinking of defining what it means to be a Partner of RBM and of finding effective mechanisms of holding Partners accountable via a registry;

- thanks were expressed to the following Board Members for volunteering to serve as members of the newly formed Board Committees:

- *Working Group to coordinate Partnership inputs to the Global Fund strategy.*

Mr Daly, Dr Mpanju-Shumbusho, Dr Reddy, Dr Roses, Dr Staley, in addition to the CEO, Ms Ivanovich and Dr Renshaw

- *Board Selection Committee (BSC):*

Dr Mpanju-Shumbusho, Dr Wijnroks, Dr Roses, Professor Yuthavong, in addition to the CEO

- *Board Performance and Accountability Committee (BPAC):*

Mr Sy (Chair), Dr Chizema, Dr Dare, Dr Lal, Mr Matta and Dr Reddy

Decision Point 02 – Formation of the Working Group to coordinate Partnership inputs to the Global Fund strategy

The Board of the RBM Partnership to End Malaria takes note of the critical importance of the Global Fund investments in malaria and the ongoing development of the next Global Fund strategy. The Board determined to form an *ad hoc* working group, consisting of members of the RBM Board, Partner Committees and Secretariat, with the urgent goal of aligning on a malaria community position to inform the Global Fund strategy. This will include how best to ensure RSSH investments support activities that will maximize key malaria outcomes.

The working group will engage immediately with the Global Fund Strategy discussions currently underway, and will consult with the full RBM Partnership Board to consolidate Partnership positions on malaria until the new Strategy Framework is approved by the Global Fund in 2021. * * *

Decision Point 03 – Approval of the Board rotation plan

The Board of the RBM Partnership to End Malaria adopted the Board Rotation plan as follows:

- a) The Board Rotation plan 2020-2022 was approved by the Board.
- b) The Board Selection Committee (BSC) was reconstituted with new membership.

The BSC, with administrative support from the Secretariat, will solicit applications from suitably qualified individuals, compile a short-list of candidates and make recommendations on new Board members for 2021 by the end of the first quarter of 2021 and for appointments in 2022 by the third quarter of 2021 for Board consideration and approval. * * *

Decision Point 04 – Appointment of the Board Committee on Performance and Accountability (BPAC)

The RBM Partnership to End Malaria Board decided to appoint a new, time-limited Board Committee on Performance and Accountability (BPAC). The BPAC will develop recommendations to:

- a) Assess and continuously improve Board performance through proportionate and objective annual assessments, and
- b) Assess and continuously improve Board accountability mechanisms, including through a more systematic engagement between the Board and stakeholders.

Recommendations will be presented to the 17th Board meeting in May 2021 for consideration, adoption and implementation.

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The Board Chair invited the CEO to present the RBM Workplan and Budget 2021 for Board's approval.

V	RBM WORKPLAN AND BUDGET 2021 OF 23 NOVEMBER 2020	RBM/B16/2020/DPO5
a	Presentation including summary of available funding for workplan period	

See Annex 9

By means of slides, **the CEO** announced that as part of the new 2021-2025 strategy implementation, it was necessary to clarify the “how” details to best support the delivery. He presented the planning steps to develop a roadmap for implementation and shared the review of the RBM functions and delivery structures, whilst referring to the summary of the key feedback received from stakeholders. He presented the possible timelines for the relevant key Board actions and highlighted the immediate next steps necessary, including the development of a costed implementation plan with recommendations on structural refinements and/or on update to operational processes that would be presented to the Board for approval in May 2021.

The CEO confirmed that the Workplan and Budget 2021 development process was consultative, collaborative, and reviewed by the Finance Committee on 6 November 2020. He confirmed that 3 new positions were proposed to strengthen the current Secretariat Team structure: Director of Advocacy and Partnerships (P-5) and two Regional Economic Community Coordinators (ICA-3). He added that no major restructuring of the Secretariat was proposed for the beginning of 2021, pending the development and approval by the Board of a detailed implementation plan for the new strategy.

The CEO presented the budget 2021 details for Board's approval.

The Board Chair invited the Chair of the Finance Committee to comment on the proposed 2021 Workplan and Budget.

Mr Nishimoto reiterated that the Finance Committee had reviewed the Workplan and Budget 2021 and commended the prioritisation exercise carried out by the Secretariat. He confirmed that, assuming the new strategy was approved, the Finance Committee endorsed the proposed Workplan and Budget 2021.

In response to **Mr Daly, Dr Levens** confirmed that the limited APPG expenditure in 2020 resulted from various cancellations of in-person travel in the context of the COVID-19 pandemic.

In response to **Mr Daly, the CEO** explained that the current 2021 Workplan and Budget was correct until the Secretariat finished the development of the costed implementation plan that would be presented to the Board for approval at the 17th Board Meeting in May 2021. The implementation plan would include detailed functions, structure, staffing levels, implementation cost, etc. The CEO confirmed that the current 2021 Workplan and Budget would be the basis of operations until then.

The Board Chair thanked all participants for their valuable contributions and hard work.

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DAY 2

ATTENDANCE LIST

See Annex 10

The Board Chair welcomed the participants to the second day of the 16th Board Meeting.

The Board Chair noted apologies from Mr Nishimoto and Mr Sy.

The Board Chair announced that Mr Chiu, Ms Churchill and Mr Demel had been invited to join the discussions for agenda items on the RBM Strategic Plan 2021-2025 and on the Hosting. The Board Chair also announced that PMI representatives, Lungi Okoko and Nathaniel Moller, had been invited to present the PMI update on data.

The Board Chair invited the Bridges to Development to present the RBM Strategic Plan 2021-2025 for Board approval.

VI	RBM PARTNERSHIP STRATEGIC PLAN 2021-2025 OF 18 NOVEMBER 2020	RBM/B16/2020/DP04
a	Presentation of the RBM Strategic Plan	

See Annex 11

By means of slides, **Bridges to Development** presented the RBM strategic plan 2021-2025 framework and narrative for Board approval. The team highlighted mainly the final revisions and updates to the Strategy framework and narrative that had been made since the last discussion by RBM Board on 19 October. The most significant update had been to reposition data as strategic enabler. They thanked Board Members for the continuous dialogue, steer and valuable insights throughout 2020 and expressed their congratulations on the conclusion of the final new strategy plan. They explained that the adoption of the new strategy by the Board would underpin the detailed implementation planning process that would follow, and which would also build upon the 2021 Workplan and Budget exercise and detail the activities drawn from the strategy. They invited Board Members to provide inputs into the introductory statement to the new strategy that had been shared as part of the pre-read which would be updated accordingly by the Secretariat and SCPC.

The Board Chair open the floor for comments and questions.

b	Q&A and inputs from the Board for adoption
---	--

The Board Members provided the following comments:

- necessity to reflect RBM Partnership's ambition to "ultimately eradicate" malaria in the new strategy mission and delete "prevent", which was already covered by "control";
- requested to remove specific operational details in relation to the RECs;

- agreed on the broad strategic direction being pursued and confirmed that the Board would review the implementation plan containing KPIs, measurable outcomes and milestones for adoption in May 2021.

In response to **Board Members, Bridges to Development** confirmed that the KPIs would be developed in the implementation planning phase and explained that the 2021 workplan and budget was done before the full assessment in relation to the resources required for the new strategy implementation. They added that the 2021 workplan and budget were already aligned with the new strategic objectives and enablers. They noted that the achievements of the RBM Partnership would depend on the resources that would be raised. **The CEO** echoed these remarks.

The Board Chair expressed sincere gratitude for everyone's efforts to finalise the new RBM Strategic Plan 2021-2025.

Decision Point 05 – Adoption of the RBM Partnership Strategic Plan 2021-2025 and 2021 Workplan and Budget

The Board of the RBM Partnership to End Malaria approves:

- the RBM Partnership Strategic Plan 2021–2025; and
- the 2021 Workplan and Budget.

The Secretariat is tasked to elaborate a five-year strategy implementation plan, incorporating high-level key performance indicators (KPIs), for approval by the Board at its next Board meeting. This implementation plan shall be informed by the 2021 workplan and reflect relevant comments made at the 16th RBM Board Meeting.

The Board Chair invited Dr Staley to present the PMI update on data.

VII PMI UPDATE ON DATA

See Annex 12

By means of slides, **Messrs Okoko** and **Moller** presented updates on PMI's data integration platform and PMI's digital community health initiative. They stressed that one of the key PMI accomplishments during 2020 included the close collaboration with RBM and other partners to design and create the RBM dashboard.

They announced that the PMI's digital community health initiative – that aimed to strengthen the delivery of health services at the community level in PMI countries – would be starting in 3 pioneer countries.

The Board Members thanked PMI for the excellent presentation and applauded the work on the digital tools at the community level, to facilitate interaction between community health workers and physicians to enhance the standard of community care.

Dr Staley thanks everyone for contributing to the PMI's work on data and expressed the willingness to continue this outstanding collaboration to drive positive change.

The RBM Partnership to End Malaria Board took note of this information

VIII AOB

- 2021 Board meetings dates, virtual/ Geneva

The Board Chair thanked Board Members for their flexibility and reconfirmed that the 2021 Board meeting dates would be 6-7 May 2021, and 2-3 December 2021, with locations to be confirmed.

IX CONCLUDING REMARKS

The Board Chair thanked all participants for fruitful discussions. The Board Chair also thanked the CEO and his Team for their hard work to ensure the smooth running of the 16th Board Meeting.

The CEO expressed the sincere gratitude to the Board for their leadership, guidance and support in 2020. He also thanked PC Co-chairs for their commitment and strong teamwork, and the Secretariat Team, including the former COO who was still providing support to RBM, for the great sense of responsibility and hard work.

The CEO also expressed the sincere gratitude to Bridges to Development.

The CEO also expressed his heartfelt thanks for Mr Nishimoto for his significant contributions to the work of the RBM Partnership, and welcomed Dr Reddy as the new Finance Committee Chair.

UNOPS, Board Member Advisers, PC Co-chairs, PC Managers and the Finance Manager left the meeting

X HOSTING REVIEW REPORT – CLOSED SESSION RBM/B16/2020/RP07

Minutes of the discussion are in a separate confidential record.

Decision Point 06 – Board consensus on Hosting matters

The Board of the RBM Partnership to End Malaria discussed the status of revisions to the UNOPS Operational Instructions (OI) which standardize the hosting terms for UNOPS-hosted Partnerships. The Board determined to rapidly develop a procedural Annex for approval by the Board to accompany the agreement for final signoff between UNOPS and the RBM Partnership.

Following the RBM/B15/2020/DP02 decision taken at the last Board Meeting on the Hosting Review, from DP02/B15, Board members take note of the progress reported and will continue to

explore alternative detailed arrangements, guided by the Hosting Working Group, as a risk mitigation approach for presentation to the Board in May 2021.

Ms Wallace and Ms Goldman Van Nostrand left the meeting.

*The CEO, Mr Araniva, Ms Boaron, Mr Boslego and Dr Renshaw left the meeting.
UNOPS rejoined the meeting.*

XI

CLOSED SESSION:
ANNUAL RBM CEO PERFORMANCE ASSESSMENT

RBM/B16/2020/RP08

Minutes of the discussion are in a separate confidential record.

* * *

ATTENDANCE LIST OF 1 DECEMBER 2020

RBM Board Members

1. **BARAKAT Maha, Board Chair**
2. **BLAND Simon, Board Vice Chair**
3. ALONSO Pedro
4. CHIZEMA Elizabeth
5. DALY Kieran
6. DARE Lola
7. GASHUMBA Diane
8. KAMWI Richard Nchabi
9. LAL Altaf
10. MPANJU-SHUMBUSHO Winnie
11. NISHIMOTO Ray
12. REDDY David
13. ROSES Mirta
14. STALEY Kenneth
15. SY As
16. YUTHAVONG Yongyuth
17. WIJNROKS Marijke

RBM Ex Officio Board Members

1. KARIM Moin, UNOPS – *partial attendance*

Alternates / Advisers

1. CHIMUMBWA John, Adviser to Richard Kamwi
2. DE RONGHE Meg, Adviser to Kieran Daly
3. FILLER Scott, Adviser to Marijke Wijnroks
4. FOSS Yngvil, Adviser to Moin Karim – *partial attendance*
5. GOLDMAN VAN NOSTRAND Lisa, Adviser to Ray Nishimoto
6. MATTA Issa, WHO Alternate
7. WALLACE Julie, Advisor to the Board Chair

Invitees

1. CHOVANOVA Lubica, UNOPS Audit Specialist – *partial attendance*
2. DIENG Abdou, Head of the Internal Audit and Investigation Group Section – *partial attendance*
3. DJIBO Yacine, SCPC Co-chair
4. FISHMAN Michal, SCPC Co-chair
5. IVANOVICH Elizabeth, ARMPC Co-chair
6. LUCARD Andrea, ARMPC Co-chair
7. LUCAS Paul, Director, UNOPS Internal Audit and Investigation Group – *partial attendance*
8. OLUMESE Peter, CRSPC Co-chair
9. RENSHAW Melanie, CRSPC Co-chair

RBM Secretariat

1. **DIALLO Abdourahmane, CEO**
2. ARANIVA Marco, Operations Senior Officer
3. BOARON Lilya, Assistant to the CEO and Board Chair
4. BOSLEGO Matthew, Policy Specialist
5. LEVENS Joshua, ARMPC Manager
6. PHIRI Mercy, Finance Manager
7. SCANLON Xenya, SCPC Manager
8. WAYESSA Daddi, CRSPC Manager

* * *

RBM/B16/2020/DP01

Geneva, 4 November 2020

PROVISIONAL AGENDA

16TH MEETING OF THE RBM PARTNERSHIP BOARD

Teleconference

14.30-18.05 CET, 1 December 2020 and 14.30-17.20 CET, 2 December 2020

DAY 1

- | | | | |
|------------|------------|---|-------------------|
| <i>10m</i> | I | ADOPTION OF THE PROVISIONAL AGENDA | RBM/B16/2020/DP01 |
| | a | Apologies | |
| | b | Declarations of Interest | RBM/B16/2020/RP01 |
| <i>10m</i> | II | ADOPTION OF THE 15TH BOARD MEETING MINUTES AND SUMMARY OF BOARD DECISIONS AND VOTING SINCE LAST MEETING | RBM/B16/2020/RP02 |
| | III | UPDATES | RBM/B16/2020/RP03 |
| <i>30m</i> | a | Updates from the CEO | |
| <i>40m</i> | b | Updates from Partner Committees <ul style="list-style-type: none"> • CRSPC • SCPC • ARMPC Board dialogue with Partner Committee Co-chairs and Managers | |
| <i>10m</i> | c | Update from the End Malaria Council | |
| <i>15m</i> | d | Update on malaria landscape from WHO | |
| <i>30m</i> | e | Update on Data from PMI | |

IV GOVERNANCE

<i>10m</i>	a	Finance Committee report	RBM/B16/2020/ RP04
<i>30m</i>	b	2020 audit report	RBM/B16/2020/ RP05
<i>10m</i>	c	Board rotation update	RBM/B16/2020/ RP06
<i>10m</i>	d	RBM Board performance and accountability	RBM/B16/2020/ DP02
<i>10m</i>	e	Discussion on Partners' Engagement	RBM/B16/2020/ DP03

* * *

DAY 2

- | | | | |
|------------|-------------|--|--------------------------|
| | V | RBM STRATEGIC PLAN 2021-2025 | RBM/B16/2020/DP04 |
| <i>20m</i> | a | Presentation of the RBM Strategic Plan | |
| <i>40m</i> | b | Q&A and inputs from the Board for adoption | |
| | VI | RBM WORKPLAN AND BUDGET 2021 | RBM/B16/2020/DP05 |
| <i>10m</i> | a | Presentation including summary of available funding for workplan period | |
| <i>30m</i> | b | Q & A and inputs from the Board | |
| <i>30m</i> | VII | HOSTING REVIEW REPORT | RBM/B16/2020/RP07 |
| <i>5m</i> | VIII | ANY OTHER BUSINESS | |
| | | <ul style="list-style-type: none">• 2021 Board meetings dates, virtual/ Geneva | |
| <i>5m</i> | IX | CONCLUDING REMARKS | |
| <i>30m</i> | X | CLOSED SESSION:
ANNUAL RBM CEO PERFORMANCE ASSESSMENT | RBM/B16/2020/RP08 |

* * * * *

Report of the RBM Partnership Chief Executive Officer

RBM Partnership to End Malaria

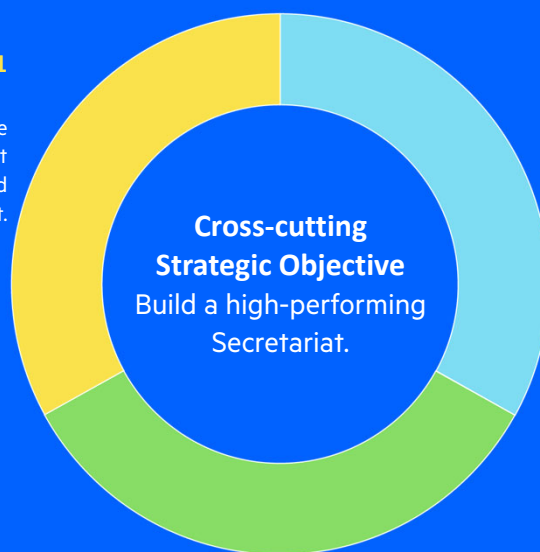
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1

RBM Partnership Strategic Plan 2018-2020

Strategic Objective 1

Keep malaria high on the political and development agenda to ensure continued commitment and investment.



Strategic Objective 2

Promote and support regional approaches to the fight against malaria, anchored in existing political and economic platforms such as regional economic communities, including in complex/humanitarian settings.

Strategic Objective 3

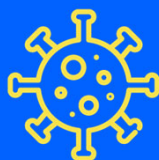
Increase the financing envelope for malaria

RBM Partnership to End Malaria

2

2

2020 achievements



Short term

Resilience in the face of a global pandemic



Medium term

Building support to sustain the fight against malaria



Long term

Aligning strategies and accelerating action to end malaria

3

Resiliency in the face of COVID-19



Potential cancellations of campaigns

2020 was scheduled to be a major year for LLIN campaigns, with 30 campaigns scheduled, and nearly all risking cancellation in March due to COVID-related disruptions to the health workforce and unclear safety guidance.



Supply chain disruptions

Lockdowns in supplier countries, changing priorities of manufacturers, and disruptions to the global supply chain increased the risk of shortages of ACTs, RDTs, PPE, and other essential commodities



Shifting global attention

COVID-19 decimated economies and dominated headlines. Resources have become limited, while malaria risked being deprioritized by governments.

4

Resiliency in the face of COVID-19



Campaigns back on track

- Over 95% of LLIN campaigns have been rolled out. IRS, SMC also on track.
- Technical assistance provided to 56 countries in 2020, as well as to ECCAS and WAHO.
- Guidance on COVID-safe malaria campaigns developed and mainstreamed through WHO working groups.



Supply chain crises averted

- All major stockouts of ACTs and RDTs largely averted due to quick responses and coordination.
- Improved tracking of commodity stocks and fast, innovative responses.



High-level advocacy

- Messaging on the need to continue the malaria fight during the pandemic.
- Outreach to Ministers, Development Banks and Heads of State to ensure malaria commitments were maintained.
- Malaria highlighted at major advocacy convenings, ensuring calls to action were heard by world leaders.

5

Building support to sustain the fight against malaria

- Zero Malaria Starts with Me expansion to **7 new countries**
- Zero Malaria Business Leadership Initiative launch in **3 countries**
- High Burden to High Impact implementation in **11 countries**
- **US\$3 billion** in Global Fund allocations for malaria secured through support to **49 countries**.
- End malaria councils and funds launched in **4 countries**.



6

At its 14th Meeting, the RBM Partnership Board endorsed the following decision :

RBM/B14/2019/DP04 – Data Aggregation, Reporting and Advocacy

The RBM Board calls on the RBM CEO to the extent feasible and appropriate to:

- aggregate malaria-relevant data willingly shared by partners across efforts to eliminate malaria,
- present to the RBM Board and the broader Partnership succinct summaries of data on strategic and operational progress, challenges, and risks, and
- advocate for increasingly open national and international data platforms and collectively support improved data systems and capacity across the global malaria community.

RBM Partnership to End Malaria

7

7

RBM Global Malaria Dashboard

Improved tracking and convening of decision-makers through the RBM Global Malaria Dashboard will improve coordination of the global malaria response.

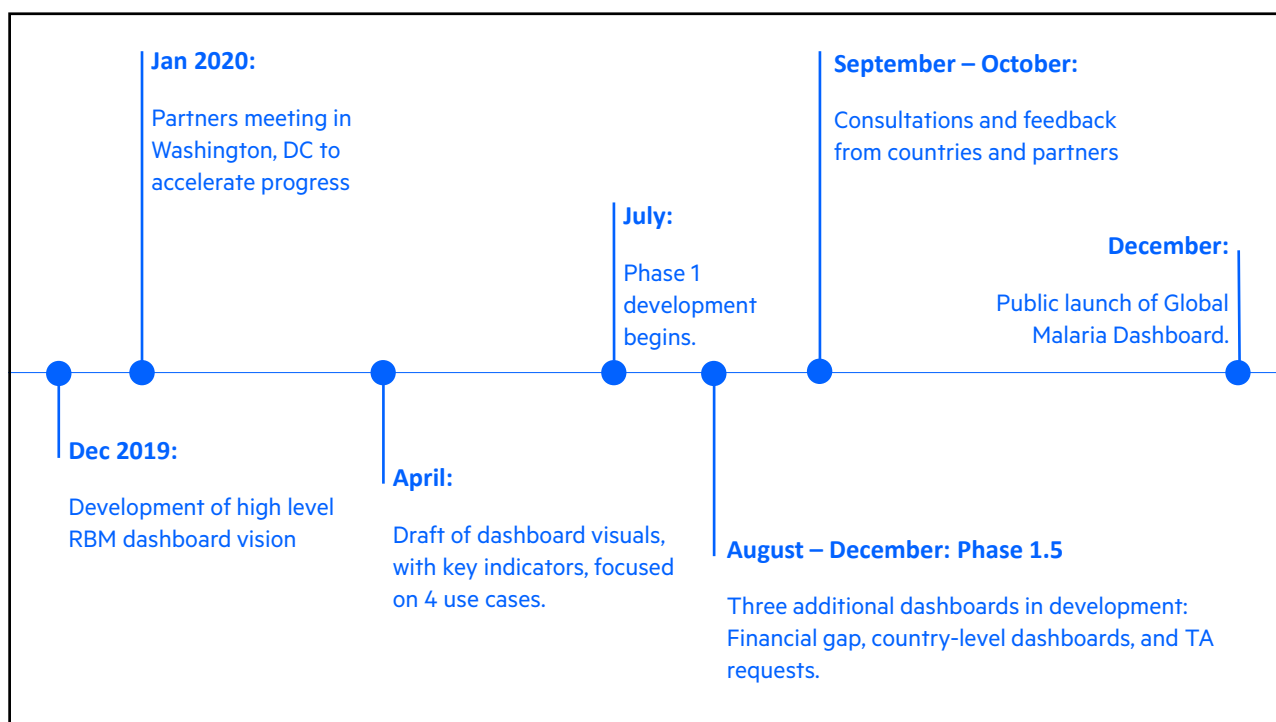


Global View: Campaigns – SMC,LLIN,IRS
All campaigns for 2020

RBM Partnership to End Malaria

8

8



9

Phase 1 RBM Public Dashboard Scope

Build a minimum viable product (MVP) for the RBM Partnership to enhance data sharing, coordination and action in the fight against malaria.

This MVP resulted in four dashboards from use cases.



Global supply chain, enables decision makers to visualize integrated data related to stock levels of key commodities across countries, status of deliveries for different malaria health commodities



Campaign status, enable decision makers to visualize the status of different campaigns across countries.



Technical assistance, enable decision makers to visualize current and planned TA provided to countries.

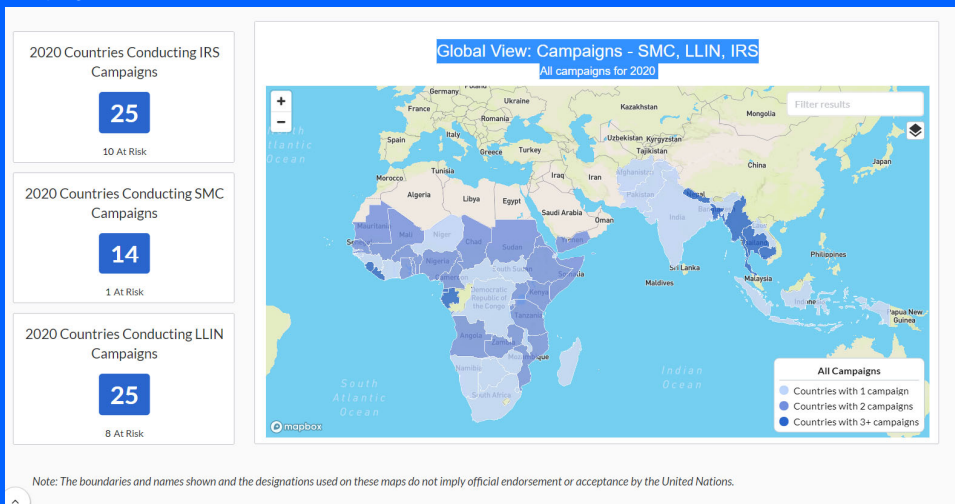


Epidemiology of malaria, enable decision makers to visualize time series analyses of malaria trends across countries, such as incidence and reported cases.

10

Dashboard visualization examples

Campaign status



11

Dashboard visualization examples

Campaign status

Global View: Campaign Status

Country	Date of Report	LLIN Campaign Status	SMC Campaign Status	IRS Campaign Status
Afghanistan (Count: 1)	11/9/2020	On Track	Not Applicable	Not Applicable
Angola (Count: 1)	11/9/2020	Not Applicable	Not Applicable	On Track
Bangladesh (Count: 1)	11/9/2020	On Track	Not Applicable	Not Applicable
Benin (Count: 1)	11/9/2020	Complete	On Track	Complete
Botswana (Count: 1)				

71 records

12

Dashboard visualization examples

Technical assistance

Current TA Planned for the Year 2020

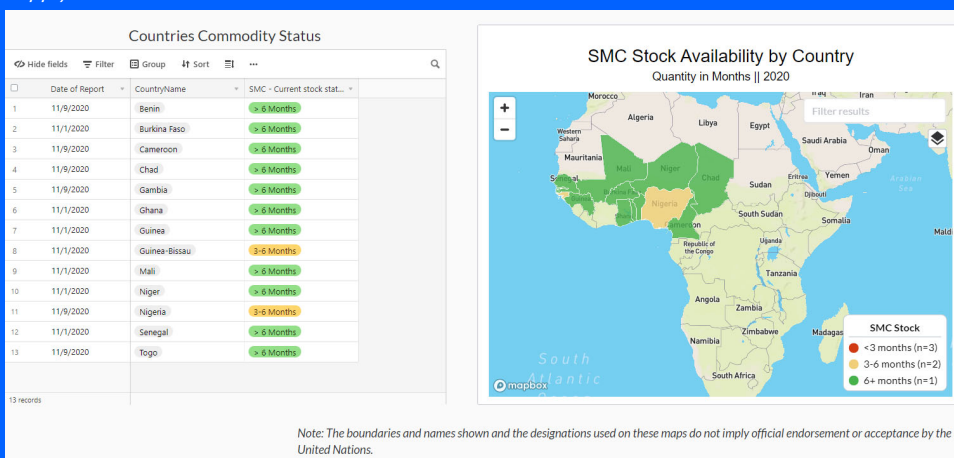
Activity	Start Quarter	Due Quarter	Technical Assistance Status	Technical Assistance Categories
Mozambique Count: 5				
Objective: Establish the NMCP organigram and ensure Programme staff, at all lev...	Q2 2020	Q2 2020		
Objective: Ensure effectiveness of programme management/Review 1. Introduce p...	Q2 2020	Q2 2020		
Mid Term Review	Q3 2019	Q3 2019		
Developed a comprehensive gap analyse	Q1 2020	Q1 2020	Completed	
Development of Global Fund proposal	Q1 2020	Q2 2020	Completed	
Namibia Count: 3				
Review and rebranding /updating of the SBCC Strategy	Q3 2019	Q3 2019		
Development of Global Fund proposal	Q1 2020	Q2 2020	Completed	
Resource mobilization to fill the gap identified in the strategic plan 2017 - 2022 a...	Q1 2020	Q2 2020		
Niger Count: 4				
Support for GF proposal application process: finance, gap analysis	Q2 2020	Q3 2020	Completed	
Support in the follow up of the HBHI	No Date	No Date		
Support in the implementation of the SaME initiative	No Date	No Date		

149 records

13

Dashboard visualization examples

Supply chain



14

Dashboard leading to action

Since May 2020, RBM has been monitoring gaps using data that is being integrated into the dashboard.

Country	ACT #1		Artemunate		SP	
	months of stock	months to pipeline	months of stock	months to pipeline	months of stock	months to pipeline
1. Angola	0.0	0.0	1.4	15.2	1.9	1.0
2. Benin	1.1	0.9			0.4	1.0
3. Burkina Faso	1.1	14.2	7.0	12.1	8.7	10.5
4. Burundi	4.0	0.0	1.7	0.0	5.5	0.0
5. Cameroon	0.0	0.2	5.4	4.1	6.8	1.5
6. Chad	4.1	3.1				0.0
7. Cote d'Ivoire	0.0	0.0	0.0	activity		
8. Comoros	11.0	0.0	11.0		14.1	
9. Djibouti	4.0	0.0	3.0	0.0	3.0	0.0
10. DRC	5.0	4.0	1.1	2.7	4.2	0.4
11. Ethiopia	19.4	2.8			1.1	0.0
12. Guinea	4.1	22.0	7.0	15.3	7.0	0.0
13. Kenya	7.1	10.0	2.1	14.8		7.0
14. Madagascar	4.4	0.0	1.4	0.0	2.5	0.0
15. Mali	13.0	0.0	0.4	0.0		0.0
16. Mozambique	1.1	13.0	1.0	13.0		1.1
17. Namibia			3.0	12.0	0.4	2.9
18. Niger	1.0	0.0				
19. Rwanda	11.0	0.0	11.0	0.0		
20. Senegal	5.0	3.0	10.0	10.0	10.0	4.0
21. Sudan	3.1	7.4	0.1	10.3	3.1	7.0
22. Tanzania	1.1	15.0	10.0	17.0	2.0	18.0

- Commodities tracking
- LLIN Campaign tracking
- IRS Campaign tracking
- GF Application Status
- Malaria upsurges and bottlenecks

The dashboard is shared with all partners on a weekly basis

15

Dashboard leading to action

Examples of bottlenecks and action identified through the use of the dashboard

- Political discussions with ministers to allow continuation of malaria programming during COVID
- Problem solving to address commodity stockouts including advocacy and resource mobilisation for airlifting commodities and fast-tracking orders
- Identification of upsurges and support to address them including case investigation, resources, accelerated commodity delivery
- LLIN campaign delays – AMP remote support for reprogramming
- Resource gaps – GF reprogramming and emergency funding
- Webinars and information notes to enhance understanding

16

Aligning strategies and accelerating action to end malaria

Developing a new strategy for the RBM Partnership

- Building on the strong foundation of the 2018 – 2020 strategy, 2021 will mark the first year of a new strategy focusing on convening and coordinating an inclusive, multisectoral response to prevent, control and eliminate malaria.

Informing the Global Fund Strategy Development

- Undertaking in-depth partner consultations and analysis to inform the malaria community position on the new Global Fund Strategy.
- Ensuring resources are allocated equitably and the Global Fund remains committed to its 2030 malaria targets.

17

Key challenges for 2021



New strategy implementation

Delivering on the 2021 workplan while developing strategy implementation plan.



Agility in changing circumstances

Constant adjustments will be required as the pandemic and economic situation continue to develop.



Lean Secretariat and ambitious strategy

Careful calibration and balance of resource needs to deliver on the new strategy.

18

Secretariat enhancement



Several recruitment processes are ongoing:

- Deputy Chief Executive
- Operations Manager
- Data Initiative Manager
- M&E Specialist
- Board Support Associate

19

2021: New perspectives



Partnership enhancement

Strengthening the partnership through intentional mapping and partner engagement.



RBM Dashboard: Global data sharing for decision making

Continuously improve and expand the scope of the dashboard, promoting greater transparency for more effective actions.



Innovation

Facilitate the inclusion and scale-up of innovations

20

2021: New perspectives



High-level advocacy

Position malaria in larger health sector financing conversations



Enhance private sector engagement

Continue to better involve the private sector in domestic resource mobilization for malaria



Gender and Human Rights

Ensure that the malaria fight supports gender and human rights

CRSPC Updates - Dec 2020

1

2020 Overview

2020 CRSPC priorities have been to support countries to:

- Carry out MPRs and update NSPs
- Submit GF Funding Requests and in grant making
- Support to modify LLIN campaigns (AMP)
- Tracking gaps and bottlenecks
- Support to address COVID-19 related bottlenecks
- Support in developing Regional Malaria Strategic Plan (SaME MSP, ECCAS, etc.)

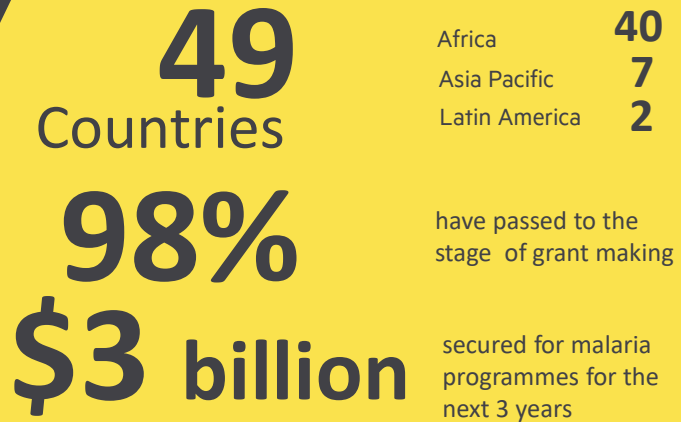
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Global Fund Funding Request – 2021-2023

RBM/CRSPC provided support to **49 countries** in the Global Fund malaria funding request development process including:

- international consultants (41 countries)
- local meeting support for country dialogue and local consultants (27 countries)
- Country peer reviews through mock TRPs and expert review of the proposals (47 countries)
- Finalizing background documents such as national strategic plans and programme reviews

All the countries supported were able to submit their funding requests on Schedule



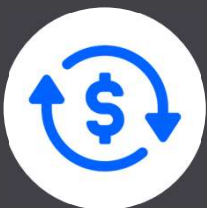
RBM Partnership to End Malaria

3

Global Fund Funding Request – 2021-2023



COVID-19 significantly impacted and complicated the process. At country level: poor internet connectivity, inability to meet in-person, re-allocation of key staff to the COVID-19 response and very heavy workloads impacted the application process



Voices from the malaria community are still not well represented on most CCMs. Many countries are struggling to finance essential coverage for high impact malaria interventions and also prioritize key RSSH activities at the same time. In a few cases, critical malaria funds have been reallocated for RSSH leaving major gaps for essential services

RBM Partnership to End Malaria

4

4

Resolve Implementation Bottlenecks

Implementation support provided to countries to resolve the bottlenecks that threaten to compromise their ability to achieve their national malaria targets:

- Implementation support was provided to 30 countries (22 with direct consultant support) to re-plan their ITNs campaigns in the context of the COVID-19 pandemic including:
 - Switching to door-to door approaches through AMP
 - Timed and regular planning calls with all ITNs campaign countries
- Support to countries in operationalizing guidance for implementation of IRS and SMC

5

Essential Commodity Tracking

- Tracking supply availability in countries (ACTs, RDTs, artesunate, LLINs, IRS, SMC commodities) and working to troubleshoot filling of gaps as they arose including airlifting of commodities and splitting deliveries where required

Addressing Bottlenecks

- Regular check-ins with countries to track and problem solve as real time malaria programming bottlenecks arose including upsurges
- Support to countries in reprogramming and resource mobilization to address gaps including establishment of End Malaria Funds
- Linking to political level as required to advocate against delays in campaigns and to sustain malaria programming

6

Global Fund Funding Request – 2021-2023

**Resolve
Implementation
Bottlenecks**

Support enabled countries to remain on track and distribute

~200 million
nets by end 2020 and

>20 million
children protected through SMC

Support has mitigated against the impact of COVID-19 by helping to address stock outs and upsurges

RBM Partnership to End Malaria

7

Design of quality, prioritized programmes

Implementation support was provided to countries to design quality, prioritized programmes

- RBM/CRSPC, in collaboration with WHO, provided support to 18 countries in developing National Malaria Strategic Plans and in conducting Malaria Programme Reviews.
- Regional Economic Communities - ECCAS and WAHO supported in the development of the Malaria SP and the SaME initiative Strategic Plan



Align malaria planning with the broader health and development agenda, and support to resource mobilization, including GF.



Enable countries to design policies, set new targets and improve their coordination systems



Opportunity to incorporate a mix of new tools and best practices including in the high burden countries

RBM Partnership to End Malaria

8

Country Resource Mobilisation



Based on the updated gap analysis for this year, more than **95%** of highly and moderately endemic countries were able to mobilise sufficient resources to cover their LLIN, IRS, SMC and case management gaps in 2020 including through portfolio optimization and reprogramming.

9

Country Resource Mobilisation



The gap analysis for 2021-2023 is being finalised, incorporating the information from the GF funding requests, and will be posted by the end of 2020.



Gabon: Support was provided to Gabon in developing a business plan for domestic resource commitments for health



End Malaria Funds were launched in Mozambique and Uganda

10

Support countries to Implement HBHI

Following the official launch of the approach in almost all the countries, the countries continued to implement the major activities in the four response elements.



From Q4 2020, RBM and WHO have revitalised the organised a monthly follow up calls with six HBHI countries to review the status of implementation of these activities.



All countries that have submitted their GF funding requests in 2020 have used the HBHI approach in their applications, including sub-national stratification and prioritisation of interventions for maximum impact



All the HBHI countries in Africa have been using their malaria scorecard management tools, and 2 countries, Mozambique and Uganda launched their End Malaria Funds in 2020, with Niger, Cameroun, Burkina Faso and DRC exploring the launch of the councils or funds, to keep malaria high on the national agenda.

11

Summary Implementation Support Provided to Countries through CRSPC

As of 30 Oct 2020

Total support provided 157, Total Countries Supported 56

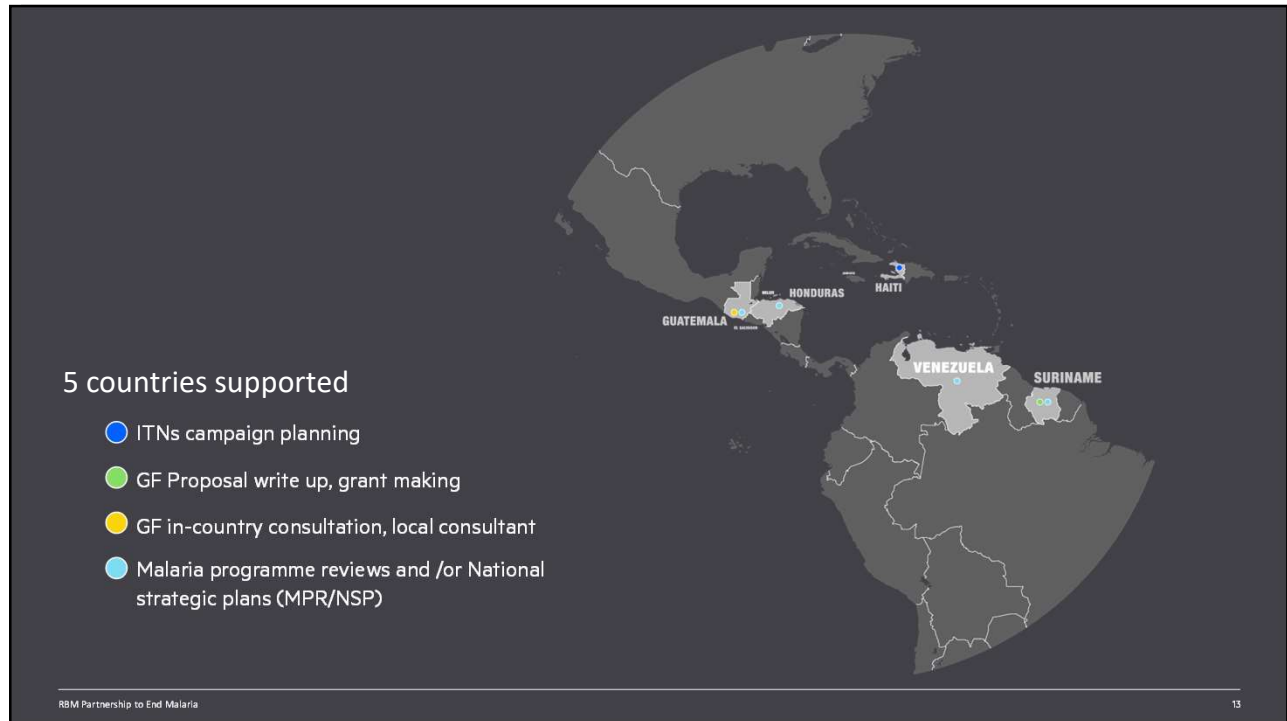
43 countries supported

- ITNs campaign planning
- GF Proposal write up, grant making
- GF in-country consultation, local consultant
- Conduct Mock TRP (face to face)
- Conduct Mock TRP2 (virtual)
- Conduct Mock TRP3 (virtual)
- Malaria programme reviews and /or National strategic plans (MPR/NSP)
- Resource Mobilisation

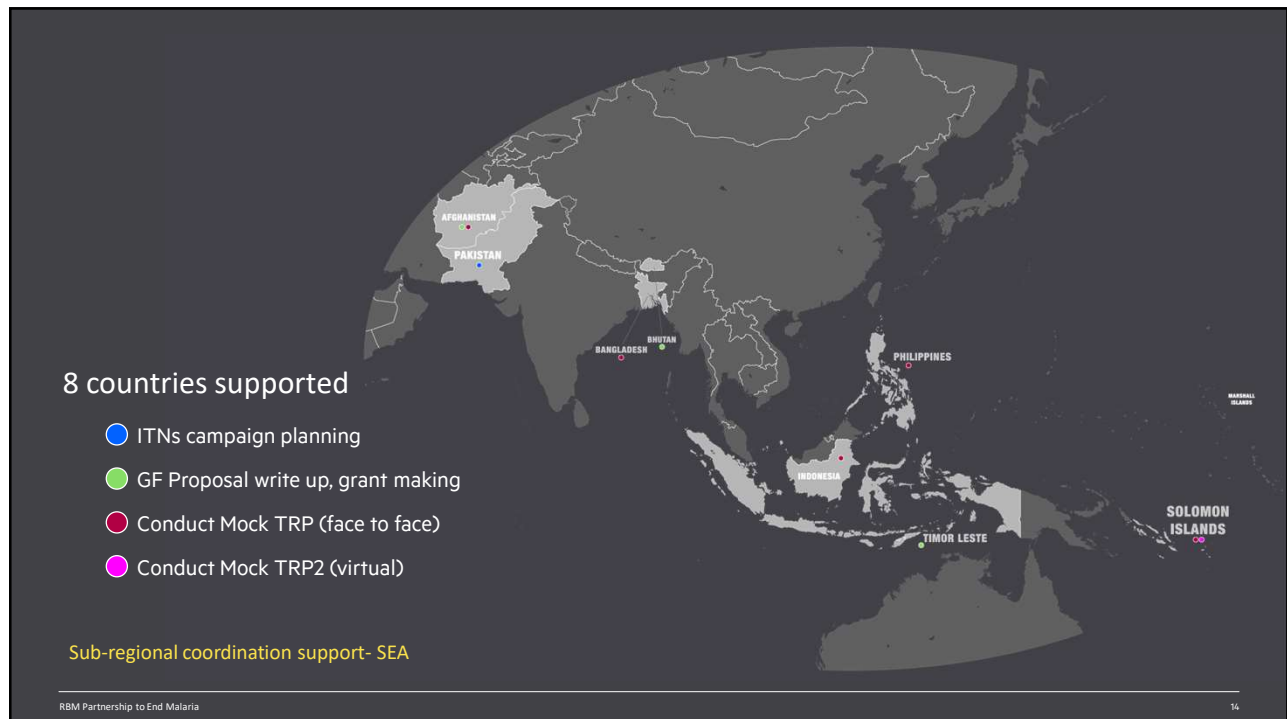
Malaria programme reviews and / or National strategic plans (MPR/NSP) also provided to ECCAS and WAHO



12



13



14

Sub-regional malaria programmes and partners virtual meeting

4 virtual meetings were organised

- Almost all countries and many of the malaria partners participated in these virtual meetings
- The meetings gave the opportunity for the countries to share best practices, challenges in mitigating the impact of COVID-19 on malaria intervention.
- RBM presented the Global Malaria Dashboard
- The meeting was also an opportunity to inform countries on the current malaria prevention control tools, perspectives to better plan and implement – updates from WHO
- Finally countries were able to forward their implementation support requirements for 2021

15


Strong Coordination between PCs

- Expanded CRSPC weekly call including members from SCPC and ARMPC to track GF applications and implementation bottlenecks including those related to COVID-19.
- Revitalised and expanded country resource mobilisation and advocacy workstream – including members from across PCs.
- Collaboration with SCPC on Zero Malaria Starts with Me launches and follow-up implementation.
- Collaboration with ARMPC during the assessment of Access to Innovation in Nigeria.
- Collaboration with ARMPC in the GF strategy inputs.

16


Filling the Resource Gaps in 2021

Critical gaps to sustain current national coverage levels



47 m

LLINs



58 m

ACTs



25 m

RDTs

RBM Partnership to End Malaria 17

17

Priority Areas for CRSPC in 2021



Political accountability through EMCs and parliamentary committees



Programmatic gap analyses/ situation analyses, ROIs etc



National Strategic Plans, HBHI and Zero Malaria Starts With Me

Ensure countries have sufficient funding, capacity and political commitment to implement their National plan



Support to the GF application process



Regional Co-ordination and collaboration



Country implementation support to address bottlenecks especially in the COVID-19 context

RBM Partnership to End Malaria 18

18

SCPC Updates

RBM Partnership to End Malaria

1

1

SCPC's Objectives

- 1** **Shape a global narrative** and align the global community to communicate and reinforce the benefits of ending malaria and what it takes – political will, funding, innovation, programmatic changes, etc.
- 2** **Create** and coordinate events and campaigns to increase awareness and a sense of urgency, and to drive actions that will accelerate ending malaria.
- 3** **Connect** malaria to the broader sustainable development agenda and build inclusive and multi-sectoral coalitions to increase financial and political support for and catalyze actions
- 4** **Enhance** sustainability of malaria advocacy efforts at global and country levels to catalyze and hold leaders accountable for actions that will accelerate ending malaria

RBM Partnership to End Malaria

2

2

Objective 1: Shape and align the narrative on malaria and COVID-19

Since April, the RBM Partnership with WHO and other partners is shaping communications on the importance of dual response to malaria and COVID-19



Key messages on malaria and COVID-19 developed and widely shared with partners



Over 100 journalists participated in fortnightly media briefings organized in collaboration with the African Media Malaria & Research Network



8 malaria and COVID-19 related statements with calls to action issued by the RBM Partnership

3



Almost 1000 earned media mentions generated by the RBM Partnership



MONDE
En Inde, les maladies de la mousson vont s'ajouter à la crise sanitaire



Malaria campaigns fight off Covid disruptions to deliver programmes



Middle East & Africa
How covid-19 hinders the fight against malaria



Catastrophe avoided as malaria control measures on track across the world



Ecobank Group spearheads new private sector initiative to end malaria



LES INITIATEURS DU MOUVEMENT PANAFRICAIN « ZÉRO PALU ! JE M'ENGAGE » ORGANISENT UN POINT PRESSE VIRTUEL/PALUDISME ET COVID-19



Africa Can't Afford COVID-19 Tradeoffs



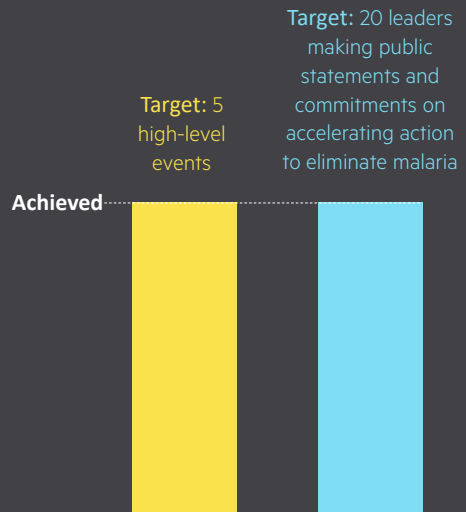
A 20% increase in RBM-generated coverage in target media containing key messages and featuring RBM spokespeople was expected, the final result has been a five-fold increase

4

Objective 2: Increase awareness and a sense of urgency, and to drive actions that will accelerate ending malaria



Despite physical events being cancelled/postponed, the RBM Partnership and Partners brought together the global health community through a series of effective virtual events with thought leaders, decision makers and youth champions from all corners of the globe.



5

Objective 2: Increase awareness and a sense of urgency, and to drive actions that will accelerate ending malaria

Re-starting malaria R&D in the face of COVID in Africa
 COVID-19 has put a halt to much of the health research happening worldwide. It is vital that malaria R&D and clinical trials are re-started as soon as possible to ensure we do not lose valuable time bringing much needed innovations, such as new drugs and diagnostics to market.
 This symposium will share perspectives from research programmes on how COVID-19 has affected their operations and their planning for re-starting R&D in a safe and effective manner.
 Tuesday, 17 November 2020
 10:45 – 13:30 GMT
 Registration link: <https://www.astmh.org/journal-meeting/registration>

HIGH-LEVEL VIRTUAL EVENT
 ZERO MALARIA CHALLENGE: HOW THE LESSONS OF THE PAST CAN INSPIRE PROGRESS TO END MALARIA

“DURING THIS PANDEMIC, ESSENTIAL MALARIA SERVICES MUST CONTINUE. WE MUST COLLABORATE, INVEST AND PROTECT MALARIA PATIENTS”
 Mrs. Wendy Morton MP, Minister for European Neighbourhood and the Americas at the UK Foreign, Commonwealth and Development Office
 Pope Francis
 While we are combating #coronavirus, we must continue the effort to prevent and cure #malaria which threatens millions of persons in many countries. I am near to all who are sick, to those who care for them.
 4:59 PM - Apr 25, 2020 - TweetDeck
 2.5K Retweets 16.8K Likes

Responding to the double challenge of malaria and COVID-19
 3-4 September, 2020

luis_figo
 EM 2020: A METADE DO MUNDO DEIXAVA-SE SOB O RISCO DE UMA MORDEIDA DE MOSQUITO FATAL!
 Watch IGTV video

“SIGNIFICANT GAINS HAVE BEEN MADE IN THE BATTLE AGAINST MALARIA AND PROGRESS NEEDS TO BE ACCELERATED. AS WE ENTER THE DECADE TO END MALARIA, I AM COMMITTED TO ENSURING THAT WE ACCELERATE PROGRESS AND END THIS ANCIENT SCOURGE”
 H.E. President Uhuru Kenyatta, President of the Republic of Kenya, Chair of the African Leaders Malaria Alliance
 ZERO MALARIA STARTS WITH ME

6

Celebrating progress through regional malaria days



Asia Pacific Malaria Week

The RBM Partnership supported Asia-Pacific Malaria week via amplification on social media, and by co-hosting with APLMA malaria gamechangers series on innovation



Malaria Day in the Americas

On Malaria Day in the Americas, the RBM Partnership joined PAHO, UNF and other partners in honoring the communities & countries across the region making strides towards zero malaria.



SADC Malaria Day

On SADC Malaria Day, the RBM Partnership joined ALMA, E8 and other partners in congratulating the newly elected Chair of the SADC Malaria Elimination 8 initiative, and participated in virtual Edu-series.

Objective 3: build multi-sectoral coalitions to increase political support and catalyze actions



Zero Malaria Business Leadership Initiative

Launched in July on the occasion of ZMSWM's 2nd anniversary, the initiative's objectives are three-fold:



Foster domestic resource mobilization for sustained financing of malaria control.



Mobilize businesses and business leaders to contribute to the reduction and elimination of malaria;



Leverage Ecobank's networks and partners to reinforce or create collaborative platforms.

Objective 3: build multi-sectoral coalitions to increase political support and catalyze actions **ZERO MALARIA BUSINESS LEADERSHIP INITIATIVE**

Zero Malaria Business Leadership Initiative

Ongoing consultations & engagement with 30 SMEs and key in country stakeholders in Benin, Burkina Faso and Senegal.

ADE AYEYEMI
CEO, Ecobank Group

"Intensifying collaboration to end malaria on the continent is an imperative as the disease continues to affect our economies. Because African SMEs are the backbone of our economies in sub-Saharan Africa, working with Speak Up Africa will ensure that we involve and empower them, as well as other private sector actors in contributing to increased awareness around malaria in our communities."

ZÉRO PALU ! LES ENTREPRISES S'ENGAGENT

ZÉRO PALU ! JE M'ENGAGE | **LES ENTREPRISES S'ENGAGENT** | **paludisme au**

RBM Partnership to End Malaria

9

Objective 4: Enhance sustainability of malaria advocacy efforts at global and country levels **ZERO MALARIA STARTS WITH ME**

Building Momentum for Zero Malaria Starts with Me

In 2020, 7 new countries joined the campaign (5 of those supported by the RBM Partnership):

- Benin, Burkina Faso, Chad, Cote d'Ivoire, Gabon, Kenya, Rwanda

To date, 19 countries have launched and are rolling out the campaign:

- Benin, Burkina Faso, Chad, Cote d'Ivoire, Eswatini, Ethiopia, Gabon, Ghana, Kenya, Mozambique, Mauritania, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, Tanzania, Uganda, Zambia

RBM Partnership to End Malaria

10

Objective 4: Enhance sustainability of malaria advocacy efforts at global and country levels 



RBM Partnership to End Malaria 11

11

Objective 4: Enhance sustainability of malaria advocacy efforts at global and country levels

In conjunction with World Mosquito Day, 20 August, the RBM Partnership launched two social media campaigns under the Zero Malaria Starts with Me umbrella:



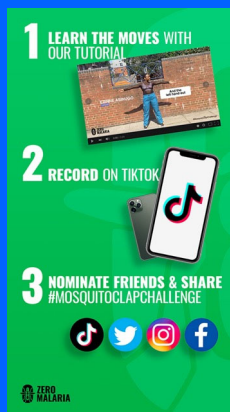

The Bigger Picture:. seen by 9m people and saw #ZeroMalaria trending on Twitter in Nigeria. Interviews with Saray Khumalo and Eliud Kipchoge seen by a potential 144.5m people across the world.

RBM Partnership to End Malaria 12

12

Objective 4: Enhance sustainability of malaria advocacy efforts at global and country levels

In conjunction with World Mosquito Day, 20 August, the RBM Partnership launched two social media campaigns under the Zero Malaria Starts with Me umbrella:

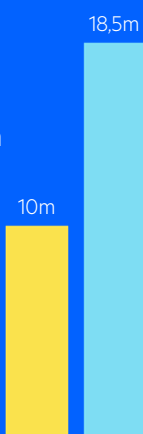


#MosquitoClapChallenge

18,5m total impressions so far, continuing through World Malaria Day 2021.

Target:
10m youth reached

Achievement:
18.5m so far



ARMPC Update to the Board

RBM Partnership to End Malaria

1

RBM Strategic Initiatives

Prioritised by the ARMPC in 2020

Strategic Objective 1

Keep malaria high on the political and development agenda

- Promoting inclusive and multisectoral partnerships
- Scaling Up New Tools

Strategic Objective 2

Promote and support regional approaches to the fight against malaria, anchored in existing political and economic platforms such as regional economic communities, including in complex/humanitarian settings.

Strategic Objective 3

Increase the financing envelope for malaria

- Domestic financing
- Innovative malaria financing
- Continued commitment from donors

RBM Partnership to End Malaria

2

Types of ARMPC contributions in 2020



Coordination and collaboration with global advocacy partners



Developing new materials for malaria advocacy



Capacity building for global civil society advocacy network



Donor outreach for resource mobilisation

3

Promoting Multisectoral Partnerships



New ARMPC Multisectoral workstream created

Multisectoral approach for cities group created (with UNDP, UN Habitat, Commonwealth Local Govt Forum, and Uniting to Combat NTDs)



Multisectoral global advocacy guide completed (with Multisectoral Working Group)

Multisectoral advocacy guide for Zambia completed (with CRSPC) essential commodities



Webinar series on malaria & rice agriculture conducted with senior JICA officials to make the case for funding multisectoral action

4

Scaling Up New Tools



Innovation and Access workstream brought together private sector, academic, PDP, NGO, and CSO partners to commission and oversee qualitative research Collaborated with SCPC on Innovation narrative



Multi-country analysis and recommendations from endemic country stakeholder on Innovation and Access (with APHRC) completed Nigeria-focused analysis and recommendations from national stakeholders completed (with CRSPC) 5-part webinar series on malaria innovations for Asia-Pacific held (with APLMA)

5

Domestic Financing & Innovative Financing



Partner committee roles and responsibilities around domestic resource mobilization aligned (with CRSPC and SCPC)



Budget advocacy training of trainers for civil society (with the Global Fund) – Francophone training held, Anglophone pushed back to 2021



Innovative financing analysis for the Malaria Elimination in Melanesia and Timor Leste Initiative (MEMTI) produced (with the Global Fund)

6

Continued Commitments from Donors



Joint COVID-19 and Malaria resource mobilization response coordinated (with WHO)



Global Financing Facility (GFF) guide for malaria programmes developed (with UNF) Thematic briefs developed on Global Health Security (with UNF and UCSF) and Humanitarian Emergencies (with UNF) Parliamentary engagement guide for malaria programmes (under procurement)



UNGA webinar to promote malaria investments held (with SCPC) Webinars held with China CDC and African countries to promote Chinese government investment (with CRSPC)

7

Cross Partner Committee Collaboration



ARMPC and SCPC held their joint annual meeting in Nairobi in February 2020, at the same time as the CRSPC Mock TRP meetings.

Digital youth workstream established (with SCPC and CRSPC) to engage with existing youth organisations, identify new youth voices and set up a network of youth malaria advocates and champions.

ARMPC also contributed to developing and disseminating messaging around COVID adaptations and impact on malaria programs (all three PCs, led by SCPC)

8

End Malaria Council Update

16th RBM Partnership to End Malaria Board Meeting
December 01, 2020

1

End Malaria Council Members



BILL GATES (co-chair)
Co-Chair, Bill & Melinda Gates Foundation



H.E. PRESIDENT UHURU KENYATTA *
Chair of African Leaders Malaria Alliance and President of Kenya



RAY CHAMBERS (co-chair)
WHO Ambassador for Global Strategy



H.E. JAKAYA KIKWETE
Former President of the United Republic of Tanzania



H.E. ELLEN JOHNSON SIRLEAF
Former President of the Republic of Liberia



GRAÇA MACHEL
Founder of the Foundation for Community Development in Mozambique



PETER CHERNIN
Founder of Chernin Entertainment and The Chernin Group



HON. MARISE PAYNE
Minister for Foreign Affairs in Australia



ALIKO DANGOTE
President and CEO of the Dangote Group

←→ President Moreno
HE King Mswati III
New pending invites

Advisory Committee



BILL & MELINDA GATES foundation



RBM Partnership To End Malaria

Office of the WHO Ambassador for Global Strategy and Health Financing

2

Looking Ahead: 2021 Engagement

DATA FOR DECISION MAKING

A priority of H.E. President Kenyatta as ALMA Chair and a continued focus of the Council is **removing political barriers to transparent, real-time, quality data** for decision making and greater application of information technology to support malaria efforts

FINANCING FOR MALARIA & HEALTH

In the shifting health financing landscape, the Council is exploring how to continue **advocating for malaria within a broader move to increase and improve health investments**, including engagement of the private sector and other partners.

COMMUNITY HEALTH WORK

Led by H.E. President Sirleaf in partnership with the Community Health Acceleration Partnership, the Council was asked to support **efforts to strengthen financing for community health workers** to enable essential services for both malaria + COVID-19

THE DUAL IMPACT OF MALARIA AND COVID-19

Underpinning these workstreams will be a continued effort to leverage investments in the COVID-19 response and integrate malaria as core to pandemic preparedness and broader health priority spending.

"Malaria is an existing crisis, and our response to COVID-19 cannot be at the expense of progress on malaria and the greater goals of eliminating major diseases." EMC member



1

IV.c Board Rotation Update

RBM Board Member	Term Start	Term End	Comment	Endemic Country/Region	Finance Committee	Eligible for Rotation			
						2020	2021	2022	2023
Dr Winnie Mpanju-Shumbusho	Apr-16	Apr-22	Reappointed in April-19, term not specified					X Spring	
Mr Elhadj As Sy	Apr-16	Apr-22	Reappointed in April-19, term not specified					X Spring	
Dr Richard Nchabi Kamwi	Apr-16	Apr-22	Reappointed in April-19, term not specified					X Winter	
Dr Altaf Lal	Apr-16	Apr-22	Reappointed in April-19, term not specified					X Spring	
Mr Ray Nishimoto	Apr-16	Apr-22	Reappointed in April-19, rotating off in 2020		FC Chair	X Winter			
Dr David Reddy	Apr-16	Apr-22	Reappointed in April-19, FC Chair term 12/20-4/22		FC Chair adv			X Spring	
HE Yongyuth Yuthavong	Apr-16	Apr-22	Reappointed in April-19, term not specified					X Spring	
Mr Simon Bland	Apr-16	May-21	Term extended with Vice-Chair nomination					S Spring	
Mr Kieran Daly	Apr-16	May-21	Term extended					S Spring	
Prof Maha Barakat	Dec-16	May-22	Term extended with Chair nomination					X Spring	
Dr Mirta Roses Periago	Dec-16	Dec-19	Reappointed in Dec-19 until Dec-2022					X Winter	
Dr Kenneth Staley	Aug-18	Aug-21	First term				X August		
Dr Diane Gashumba	Oct-19	Oct-22	First term					X	
Dr Marijke Wijbroeks	Oct-19	Oct-22	First term					X	
Dr Elizabeth Chizema	Q2-20	Q2 23	First term						X
Dr Lola Dare	Q2-20	Q2 23	First term						X
Dr. Pedro Alonso (WHO)	Apr-16		WHO appointee, not eligible for Rotation						
Mr. Moin Karim (UNOPS)	Apr-16		UNOPS appointee, not eligible for Rotation						

CODE:

Blue	Endemic
Green	End of first term
Red	End of second term

RBM Partnership To End Malaria 2

2

IV.c Board Rotation Update

Bye-laws require:

- In 2019, increased Board to 17 individuals – with intention to reduce to 15 during next rotation
- WHO and UNOPS Ex Officio seats are permanent
- At least half of other Board members from malaria-affected countries and regions
- Diversity of skills, geographic and gender balance

Rotation schedule:

- 2020: 1
- 2021: 4
 - 3 in Spring
 - 1 in Fall
- 2022: 6
 - 5 in Spring
 - 1 in Fall/Winter

Recruitment Schedule:

- In Spring 2021, Board size reduces to 13, dropping further by end of year with scheduled departures
 - Reconstitute Board Selection Committee in Q1 2021
 - Launch recruitment for in Spring 2021 with focus on key skills & geographies
 - Also manage Board Vice Chair replacement after Spring 2021, recruitment of next Chair and FC Chair for Spring 2022

3

IV.c Board Rotation Update

- Board Selection Committee members 2020
 - Maha Barakat
 - Simon Bland
 - Pedro Alonso
 - Kieran Daly
 - Mirta Roses
 - Ken Staley
- Discussion: Reconstitute same group, or add new members?

4

IV.d RBM Board performance and accountability

In section 4.2, the RBM Bye-Laws outline the accountability of the Board and requires the Board to establish an accountability framework and undertake independent performance reviews of the Partnership and itself.

4.2. Accountability

The Partnership Board is accountable to the Partners, global public opinion, and especially to people living in communities affected by malaria. The Partnership Board will seek opportunities to engage and consult with Partners on an on-going basis. The Partnership Board will establish and regularly update an accountability framework that includes regular, published, independent performance reviews of the Partnership and itself.

5

IV.d RBM Board performance and accountability

The RBM Board launched an anonymous **Board Self-Assessment** tool in late 2018 – early 2019 through Survey Monkey, examining:

- I. Composition and Quality
- II. Risk Management
- III. Process and Procedures
- IV. Oversight of the Financial Reporting Process
- V. Ethics and Compliance
- VI. Strategic and Organizational Alignments
- VII. Monitoring Activities
- VIII. Overall Comments.

6

IV.d RBM Board performance and accountability

Eight recommendations were generated:

1. The Board Selection Committee to consider the findings on the diversity for new Board Members, particularly in terms of gender balance and malaria endemic country/regional representation.
2. The Board meetings will include regular briefings on the key strategic initiatives, such as the High Burden to High Impact Response Strategy.
3. The RBM Partnership Bye-Laws and Hosting Terms will be reviewed at the April 2019 Board meeting and will be reviewed periodically (every two years), as needed.
4. The RBM Board will establish a more thorough induction programme for new Board Members, to be rolled out in spring 2019 for incoming Board Members.
5. The RBM Board should prioritise finalising the risk log and implement its periodic review, including benchmarking for performance.
6. RBM Partnership will review internal and external communications processes, with the aim of increasing information to the Board about Secretariat, PC and Working Group activities.
7. The RBM Board to request the Secretariat to prepare a reference note on internal and external audits under UNOPS hosting.
8. The RBM Board to include as a routine item a written update on the DOI process ahead of each Board meeting.

7

IV.d RBM Board performance and accountability

Options, discussion and recommendations for Board performance and accountability

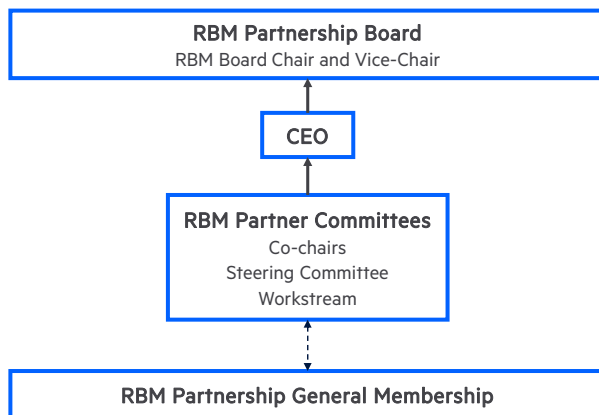
- RBM Bye-laws, prudent management require periodic performance and accountability assessments
- Propose: Board Committee on Board Performance & Accountability (BPA)

8

IV.e Discussion of Partners engagement

RBM Board Leadership recognized the need for a **transparent mechanism** to enable partners to **engage directly with the RBM Board**.

Partners currently engage with the Board through either **serving on the Board** or report to the Board **through the RBM Partner Committees**.



9

IV.e Discussion of Partners engagement

Improving engagement of partners by RBM in one of the **Cross-cutting strategic enablers**

Data Sharing and Use	SE1: Open and timely sharing of quality data to drive decision-making, build transparency and foster accountability
Effective Partnership	SE2: Meaningful engagement of partners at the global, regional and national level to leverage their unique capabilities, expertise and perspectives
Targeted Advocacy and Communications	SE3: Targeted advocacy and communications to keep malaria high on global health and development agendas to drive leadership, commitment, and change
Focused Secretariat	SE4: Ensuring a Secretariat that energizes the partnership to deliver the strategy
Adapt to evolving COVID-19 environment	

The 2021 Workplan proposes under **SE2** an activity on **Partnership mapping and engagement analysis**, whereby the Secretariat will engage a consultant to map existing partners and engagement opportunities to optimize partner contributions toward the Strategic Objectives.

10

IV.e Discussion of Partners engagement

Suggested points for discussion:

- What are the key considerations for determining how RBM Partners can meaningfully engage with the Board?
- What is the role of partners in informing proceedings of the **Board meeting**?
- What is the role of partners in engaging with the Board outside of Board Meetings?
- Partners involved in RBM work engaged through PCs; are Board meetings the right venues for engaging other partners? Should other arrangements be made?
For example, Should the Board play a role in the regional CRSPC convenings of NMCPs and Partners, with listening sessions and other interactive engagements?
- How can the Board best hold itself accountable to Partners?

11



1 December 2020

Thank you, find out more
visit endmalaria.org
[@EndMalaria](https://twitter.com/EndMalaria)

RBM Partnership to End Malaria
5th floor, GHC, Chemin du Pommier 40, 1218 Le Grand-Saconnex, Geneva, Switzerland.
info@endmalaria.org

12



1 December 2020

RBM Workplan and Budget 2021

RBM Partnership to End Malaria

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Implementation considerations

From Strategy Framework to implementation

1 The 'what'

Vision	A world free from the burden of malaria		
Mission	To convene and coordinate an inclusive, multilateral response to prevent, control and eliminate malaria		
Principle	Ending malaria is central to achieving UHC, global health security, poverty reduction and reducing inequalities		
Strategic Objectives and Strategic Actions	SO1. Optimize the quality and effectiveness of country and regional programming 1.1 Support countries in the design of quality, prioritized programmes 1.2 Support countries in the use of real-time sub-national data in planning, implementation and monitoring 1.3 Facilitate timely access to implementation support to address bottlenecks and gaps 1.4 Support building local management and technical capacity 1.5 Support countries to strengthen multi-stakeholder partnership coordination at the national and sub-national level 1.6 Leverage regional alliances and initiatives to ensure cross-border and trans-regional coordination and coherence	SO2. Maximize levels of financing 2.1 Advocate for optimizing global resource envelopes from existing donors and new channels of financing 2.2 Support countries with mobilizing and prioritizing domestic and other resources for malaria and health	SO3. Facilitate the deployment and scale-up of new products, techniques or implementation strategies 3.1 Promote and support the inclusion of new innovations in the design and delivery of programmes 3.2 Foster peer learning and knowledge exchange to facilitate deployment and scale-up of new products, techniques or implementation strategies
Cross-cutting Strategic Enablers	SE1: Open and timely sharing of quality data to drive decision-making, build transparency and foster accountability. SE2: Meaningful engagement of partners at the global, regional and national level to leverage their unique capabilities, expertise and perspectives. SE3: Targeted advocacy and communication to keep malaria high on global health and development agendas to drive leadership, commitment, and change. SE4: Ensuring a Secretariat that energises the partnership to deliver the strategy.		
Data Sharing and Use	Adapt to evolving COVID-19 environment		

- Clarifies vision, mission, principles
- Defines Strategic Objectives: 2021-2025
- Responsive to current context/status
- Puts countries at the centre

2 The 'how' to clarify:

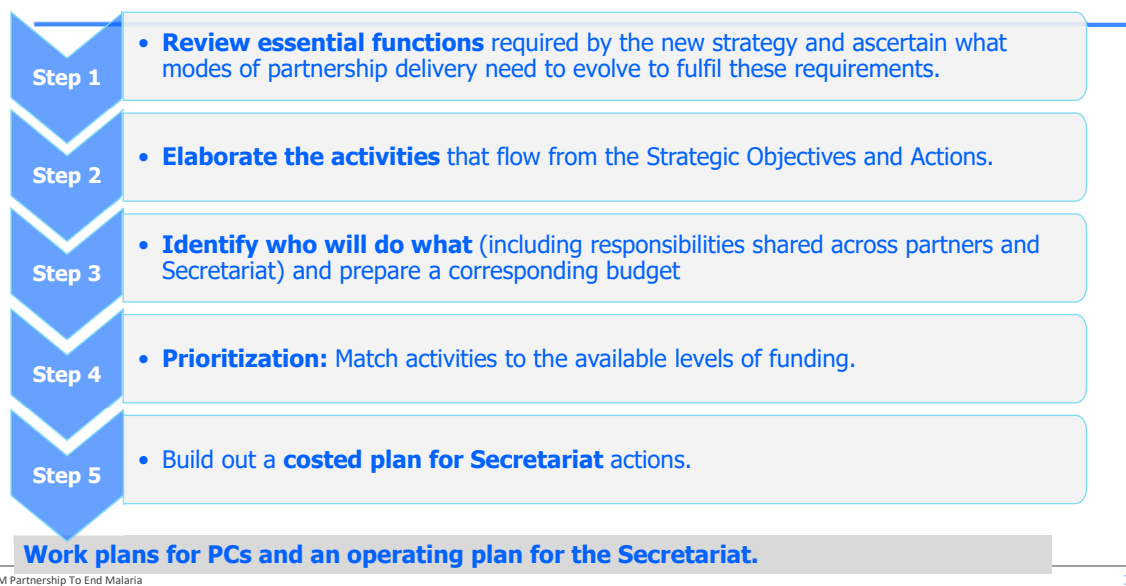
1. What functions must RBM play?
2. How must the RBM Partnership, including PCs, best organize to deliver these functions?
3. How to focus the Secretariat to best support such delivery?

RBM Partnership To End Malaria

2

2

A 'roadmap' for Implementation planning steps



3

Review of RBM functions and delivery structures

Essential functions	Structures to enhance implementation
Coordinating support to countries and regions	Continue through the CRSPC and focus all country-facing initiatives here (including work on data, domestic resource mobilization and innovation)
Global Advocacy and Communications	Could continue to be implemented through the two existing committees SCPC and ARMPC while reassessing optimum structuring
High Level Advocacy and Resource Mobilization	Create a new channel to engage leaders of government, industry and partner organizations or bodies – to be coordinated by the CEO, drawing from relevant PCs
Enabling effective accountable partnerships	Placing greater focus on and committing needed resources to this function within the Secretariat team

4

Inputs relating to governance structures

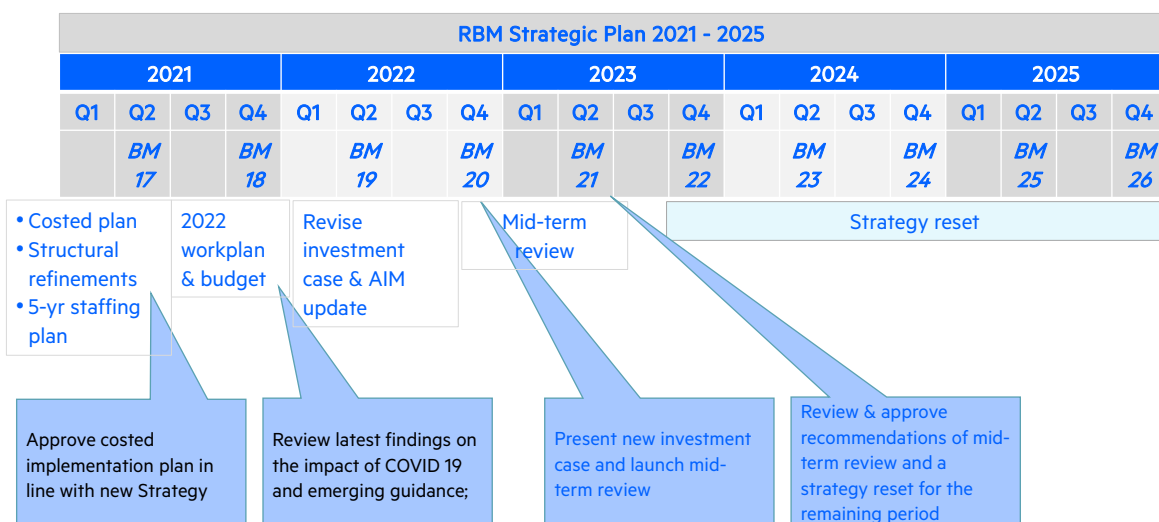
Summary of key feedback received from stakeholders

Partner Committees	Working Groups	RBM Board	RBM Secretariat
<ul style="list-style-type: none"> Strengthen coordination across PCs Joint work-planning and prioritizing, Greater clarity and transparency on which PCs are delivering on what 	<ul style="list-style-type: none"> Define WG role more clearly Create stronger relationships between WGs and PCs More effective consultations to develop work plans and budgets Harmonize with the RBM activities and PC workplans 	<ul style="list-style-type: none"> Challenges in that not all constituencies feel they are adequately represented Implement consultations called for in Bye-laws Introduce “partnership forum” type mechanisms could be explored Enhance ownership Mobilize resources to implement priorities identified 	<ul style="list-style-type: none"> Reinforce senior leadership Focus on partnership work Align human resource plans

5

Implementation considerations

Possible timelines & key Board actions



6

2021 Workplan & Budget

7

Work plan and budget preparation

- 2021 Workplan and budget prepared in conjunction with Board-steered new strategic plan for 2021-2025.
- Process led by Partner Committees and the Secretariat, with inputs from PC Steering Committees and Workstreams.
- Proposed activities completely aligned with new strategic framework for 2021-2025.
- Reviewed and endorsed by the Finance Committee Meeting held on 6 November 2020.

8

2021 Workplan –Objectives



Work plan and budget preparation

Greater focus:

- Technical support to countries prioritized around addressing bottlenecks affecting program delivery and resource mobilization.
- Advocacy, campaigns, and target audiences selected in-line with the new strategic objectives.
- Analysis or research will be directly translated into action.

New areas of work:

- Strategic tracking of bottlenecks around key commodities by CRSPC.
- RBM Dashboard to convene high-level decision-making.
- Strategy to improve partnership engagement and activation.
- Update to *Action and Investment to Defeat Malaria*.

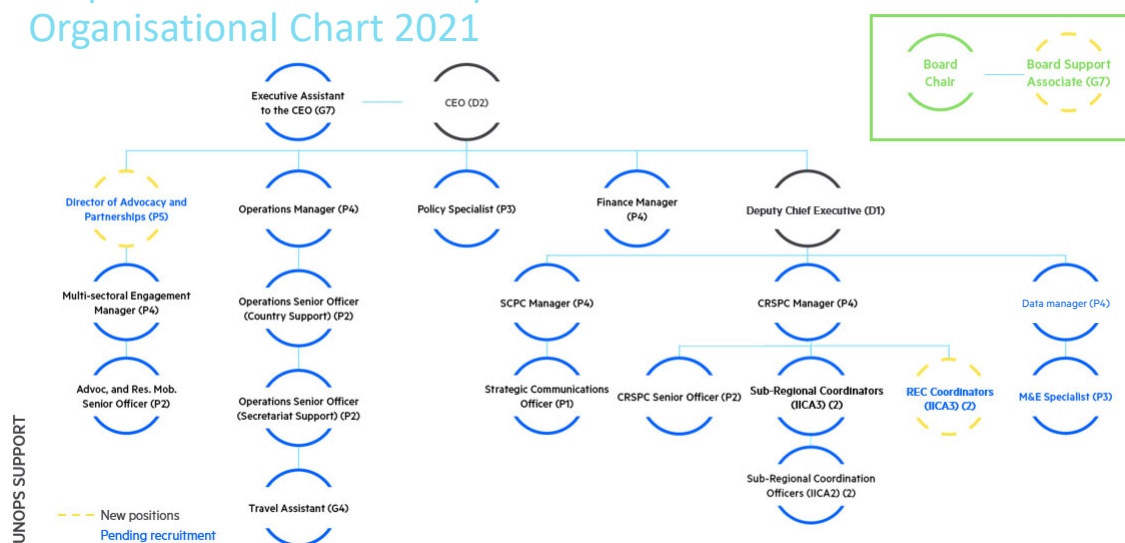
Work plan and budget preparation

Exclusions:

- Duplication of efforts and strengths of other partners:
 - In Policy formulation
 - Advocacy and Resource Mobilization: focus on new market
 - Innovations: focus on access bottlenecks

11

Proposed RBM Partnership Secretariat Organisational Chart 2021



12

2021 Budget

2021 Budget Summary by Objective	Amount in USD
Strategic Objective 1: Optimize quality and effectiveness of country and regional programming	3,751,000
Strategic Objective 2: Maximize levels of financing	1,262,000
Strategic Objective 3: Facilitate the deployment and scale-up of new products, tools, strategies or approaches	100,000
Cross-cutting Strategic Enabler 1: Open and timely sharing of quality data to drive decision-making, build transparency and foster accountability	475,000
Cross-cutting Strategic Enabler 2: Effective Partnership - Meaningful engagement of and participation by diverse malaria partners to drive action	545,000
Cross-cutting Strategic Enabler 3: Targeted advocacy and Communications - Targeted advocacy and communications to keep malaria high on global health and development agendas to drive leadership, commitment, and change	1,100,000
Cross-cutting Strategic Enabler 4: Focused Secretariat - Ensuring a Secretariat that energizes the partnership to deliver the strategy	5,617,080
UNOPS Management Cost (7%)	899,506
TOTAL (USD)	13,749,586

2021 Budget Summary by Lead	Amount in USD
ARMPC	555,000
CRSPC	4,558,000
SCPC	1,100,000
Cross-cutting Objectives & RBM Secretariat	6,637,080
UNOPS Management Cost (7%)	899,506
TOTAL (USD)	13,749,586

ATTENDANCE LIST OF 2 DECEMBER 2020

RBM Board Members

1. **BARAKAT Maha, Board Chair**
2. **BLAND Simon, Board Vice Chair**
3. ALONSO Pedro
4. CHIZEMA Elizabeth
5. DALY Kieran
6. DARE Lola
7. GASHUMBA Diane
8. KAMWI Richard Nchabi
9. LAL Altaf
10. MPANJU-SHUMBUSHO Winnie
11. REDDY David
12. ROSES Mirta
13. STALEY Kenneth
14. YUTHAVONG Yongyuth
15. WIJNROKS Marijke

RBM Ex Officio Board Members

1. FOSS Yngvil, UNOPS – *partial attendance*

ABSENT WITH APOLOGY

1. NISHIMOTO Ray
2. SY As

Alternates / Advisers

1. CHIMUMBWA John, Adviser to Richard Kamwi
2. DE RONGHE Meg, Adviser to Kieran Daly
3. FILLER Scott, Adviser to Marijke Wijnroks
4. GOLDMAN VAN NOSTRAND Lisa, Adviser to Ray Nishimoto
5. MATTA Issa, WHO Alternate
6. WALLACE Julie, Advisor to the Board Chair

Invitees

1. DJIBO Yacine, SCPC Co-chair
2. FISHMAN Michal, SCPC Co-chair
3. IVANOVICH Elizabeth, ARMPC Co-chair
4. LUCARD Andrea, ARMPC Co-chair
5. MOLLER Nathaniel, PMI – *partial attendance*
6. OKOKO Lungi, PMI – *partial attendance*
7. OLUMESE Peter, CRSPC Co-chair
8. RENSHAW Melanie, CRSPC Co-chair

RBM Secretariat

1. **DIALLO Abdourahmane, CEO**
2. ARANIVA Marco, Operations Senior Officer
3. BOARON Lilya, Assistant to the CEO and Board Chair
4. BOSLEGO Matthew, Policy Specialist
5. LEVENS Joshua, ARMPC Manager
6. PHIRI Mercy, Finance Manager
7. SCANLON Xenya, SCPC Manager
8. WAYESSA Daddi, CRSPC Manager

* * *



RBM Partnership 2021 – 2025 Strategy

RBM Partnership to End Malaria

1

1

Session outline

1. Recap of Strategy Development Process

2. Proposed 2021 – 2025 Strategy

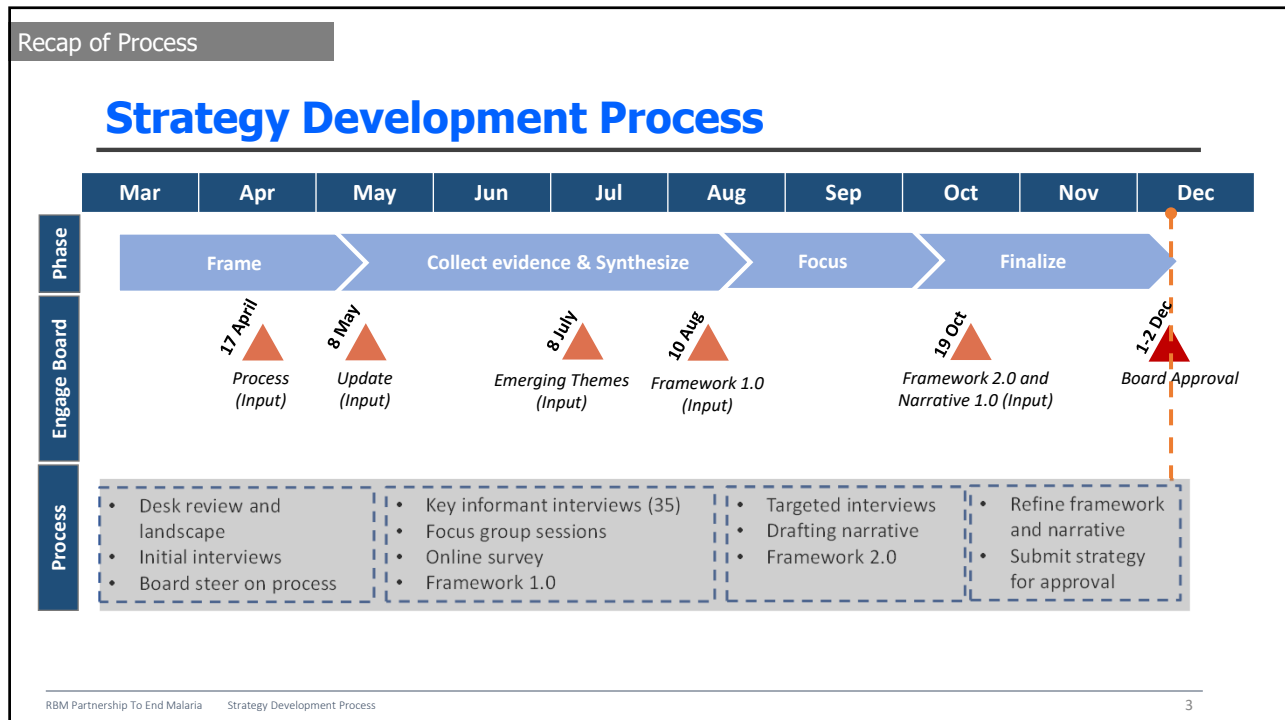
- Updates since the 19 October 2020 Board call
- **For decision:** Approval of the 2021 – 2025 Strategy
- **For input:** Introductory statement to the Strategy

3. Decision Point

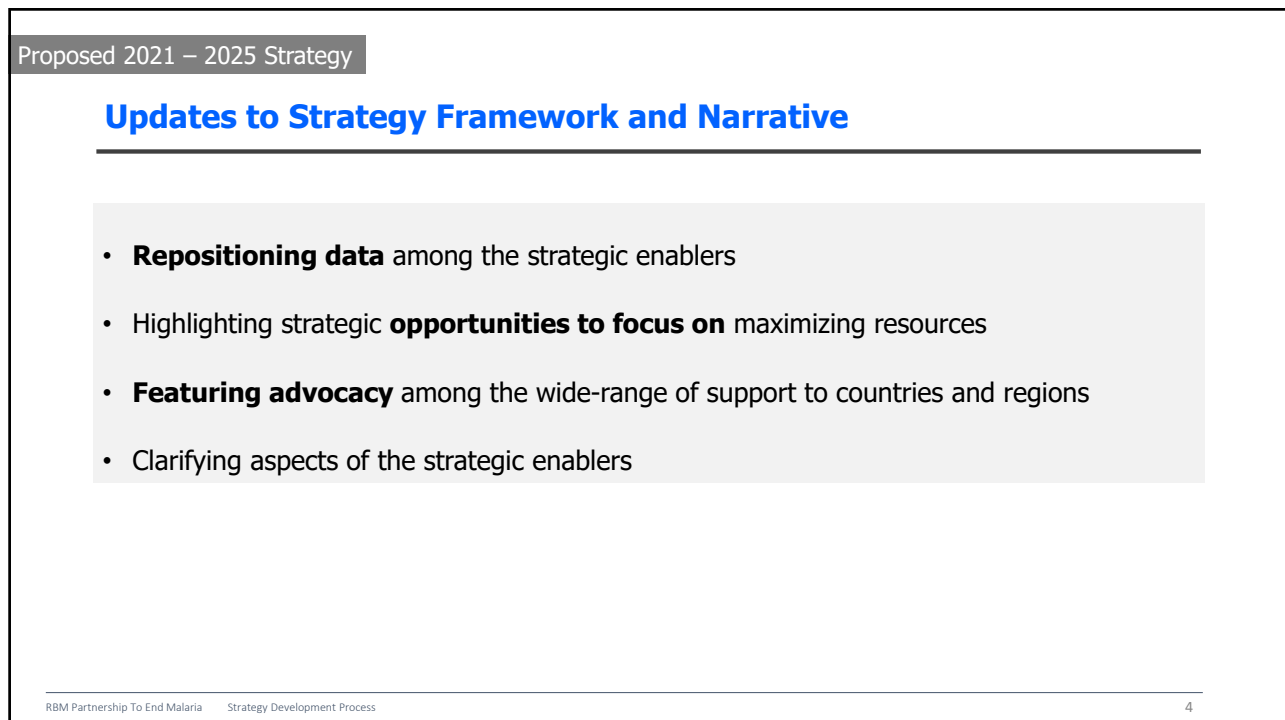
RBM Partnership To End Malaria Strategy Development Process

2

2



3



4

Proposed 2021 – 2025 Strategy		RBM Partnership to End Malaria 2021-2025 Strategy Framework	
Vision	A world free from the burden of malaria		
Mission	To convene and coordinate an inclusive, multisectoral response to prevent, control and eliminate malaria		
Principle	Ending malaria is central to achieving UHC, global health security, poverty reduction and reducing inequalities		
Strategic Objectives and Strategic Actions	SO1. Optimize the quality and effectiveness of country and regional programming	SO2. Maximize levels of financing	2.1 Advocate for optimizing global resource envelopes from existing donors and new channels of financing 2.2 Support countries with mobilizing and prioritizing domestic and other resources for malaria and health
	1.1 Support countries in the design of quality, prioritized programmes 1.2 Support countries in the use of real-time sub-national data in planning, implementation and monitoring 1.3 Facilitate timely access to implementation support to address bottlenecks and gaps 1.4 Support building local management and technical capacity 1.5 Support countries to strengthen multi-stakeholder partnership coordination at the national and sub-national level 1.6 Leverage regional alliances and initiatives to ensure cross-border and cross-sectoral coordination and coherence	SO3. Facilitate the deployment and scale-up of new products, techniques or implementation strategies	3.1 Promote and support the inclusion of new interventions in the design and delivery of programmes 3.2 Foster peer learning and knowledge exchange to facilitate deployment and scale-up of new products, techniques or implementation strategies
Cross-cutting Strategic Enablers			
Data Sharing and Use	SE1: Open and timely sharing of quality data to drive decision-making, build transparency and foster accountability.		
Effective Partnership	SE2: Meaningful engagement of partners at the global, regional and national level to leverage their unique capabilities, expertise and perspectives.		
Targeted Advocacy and Communications	SE3: Targeted advocacy and communications to keep malaria high on global health and development agendas to drive leadership, commitment, and change.		
Focused Secretariat	SE4: Ensuring a Secretariat that energizes the partnership to deliver the strategy.		
Adapt to evolving COVID-19 environment			

5

Proposed 2021 – 2025 Strategy
<h2>Next steps</h2> <ul style="list-style-type: none"> Detailed strategy implementation planning that builds on 2021 Workplan/Budget <ul style="list-style-type: none"> Activities drawn from Strategy and articulated with greater granularity Coordinated by Secretariat and Partner Committees Bring further focus and prioritization while adjusting to evolving context Continuous review and refinement to enhance delivery Publication and dissemination of Strategy upon Board approval <ul style="list-style-type: none"> Introductory statement shared for Board input prior to doing so
<small>RBM Partnership To End Malaria Strategy Development Process</small>
<small>6</small>

6

Decision Point

RBM/B16/2020/DP04 – RBM Strategic Plan 2021 - 2025

The RBM Partnership to End Malaria Board approved the proposed RBM Strategic Plan 2021-2025 and tasked the Secretariat with its implementation.

PMI Data Integration Update

December 2, 2020

PMI | U.S. PRESIDENT'S
MALARIA INITIATIVE

LED BY



Outline

1. Update on PMI's Data Integration Platform
2. Update on PMI's Digital Community Health Initiative
3. Discussion

PMI | U.S. PRESIDENT'S
MALARIA INITIATIVE

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By automating the **triangulation** of epidemiological, supply chain, climate, financial, programmatic and other data, we can better inform the following **key questions**:

*Are resources allocated towards the **optimal mix of interventions** in-country, and at the right times and places?*

Are there opportunities to better allocate resources to prevent gaps or redundancies in coverage?



*Are PMI-funded implementing partners **performing optimally**?*

*What are historical trends across data silos and can we begin to **predict** future trends?*

M-DIVE Data and Platform Architecture

A few of the Datasets currently in M-DIVE

Epidemiological HMIS/ DHIS2

Supply & Logistics LMIS

Commodity Procurement

Entomological monitoring

Funding

Surveys

Climate

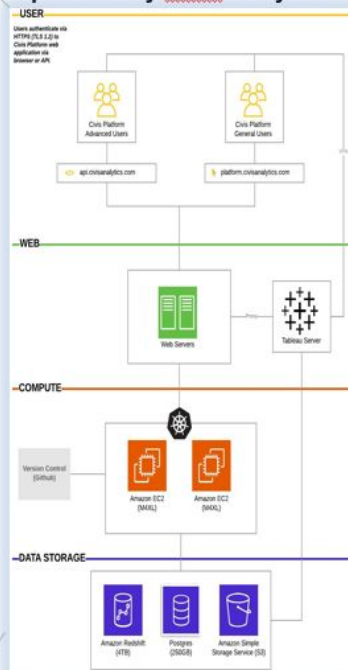
Health facility location

Health workforce

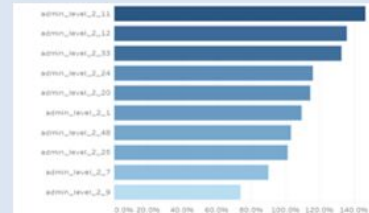
Satellite Imagery

COVID-19

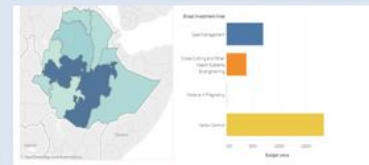
Data Lake powered by Civi Analytics



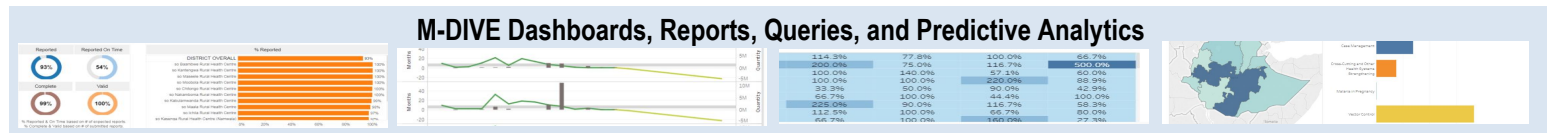
Dashboards, Reports, Queries, and Predictive Analytics



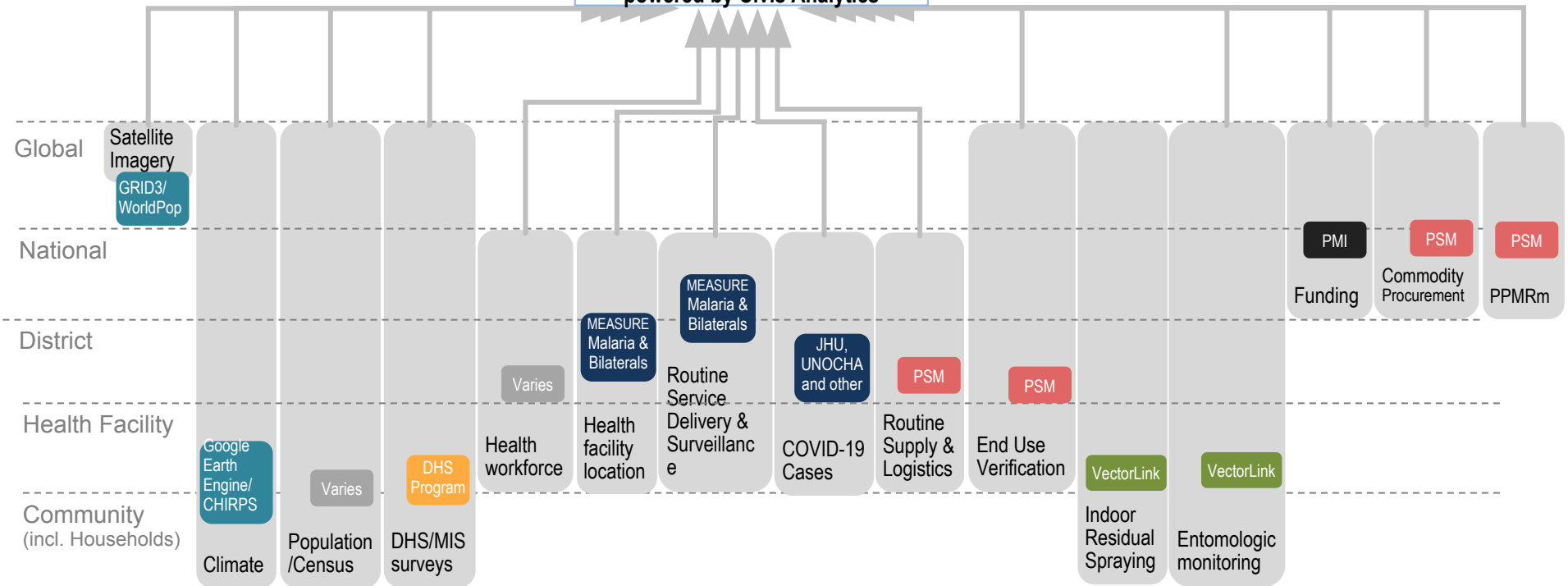
Month	Value 1	Value 2	Value 3	Value 4
September 2017	114.3%	77.8%	100.0%	56.7%
July 2018	100.0%	75.0%	115.7%	50.0%
August 2018	100.0%	140.0%	57.1%	60.0%
September 2018	100.0%	100.0%	120.0%	85.9%
	33.3%	50.0%	90.0%	42.9%
	56.7%	100.0%	44.4%	100.0%
	125.0%	90.0%	114.7%	50.3%
	115.0%	100.0%	66.7%	80.0%
	64.7%	100.0%	140.0%	37.3%



Data for Decision Making | Where does M-DIVE data come from?



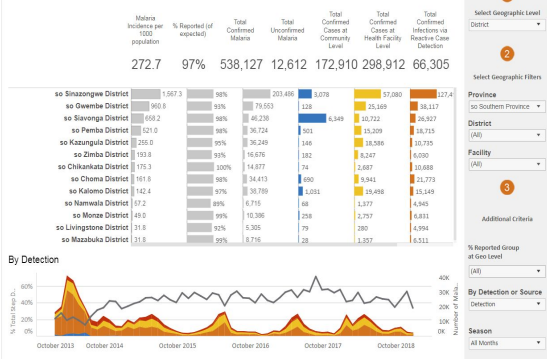
M-DIVE Data Lake powered by Civis Analytics



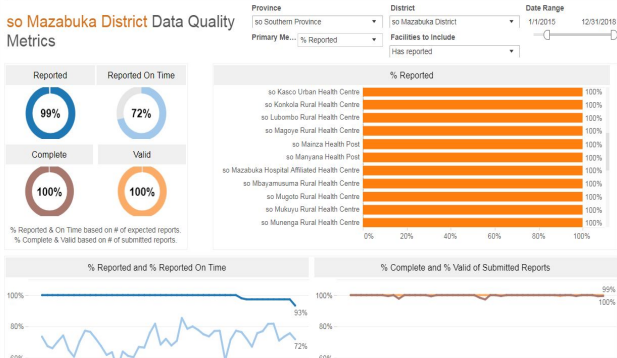
Progress to date | PMI's Quarterly Report

Malaria Risk Overview

Risk Overview for Province: so Southern Province District:

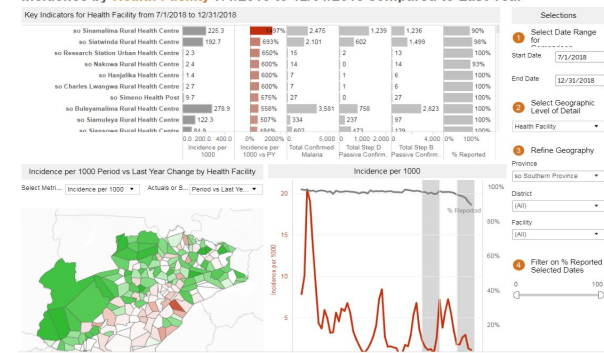


Data Quality Metrics



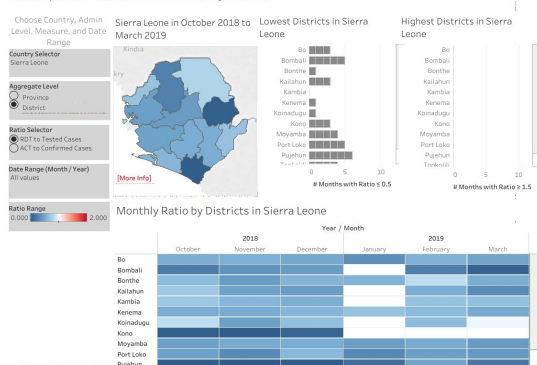
Year-on-Year Comparison

Incidence by Health Facility 7/1/2018 to 12/31/2018 compared to Last Year



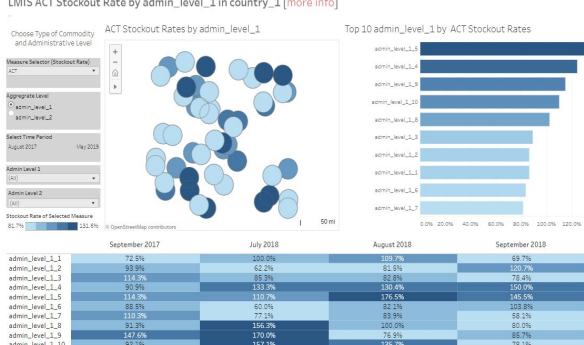
RDT Consumption to Tested Cases

Consumption Variables for Sierra Leone by Districts



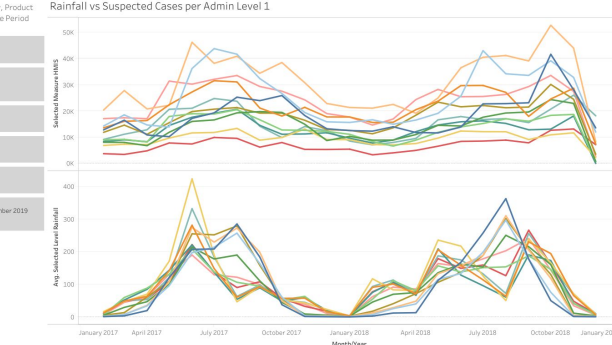
Stock out Metrics

LMIS ACT Stockout Rate by admin_level_1 in country_1 [more info]



Rainfall - Malaria Cases Comparison

Rainfall vs Suspected Cases per Admin Level 1



Data Integration | Key Accomplishments over last year

- Collaborated with RBM, McKinsey, and Zenysis on the design and implementation of the RBM dashboard
- Established M-DIVE API connection to DHIS2 for HMIS data from 8 countries
- Developed the COVID-Malaria Impact Tracking and Vulnerability Tool
- Collaborated with BMGF to develop prototypes for 1) the Swiss TPH OpenMalaria Intervention Scenario Planning Tool, and 2) the GF Reporting tool
- Developed prototype for High Resolution Geospatial Mapping of Population and Infrastructure (using satellite imagery)
- Established API connection to PMI Supply Chain Partner database for commodity procurement data



National



Plot by:

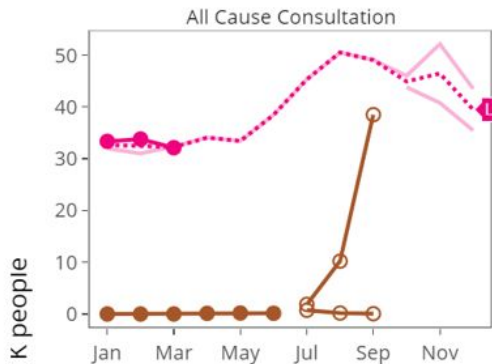
Country Indicator

Country XYZ

Sub-National

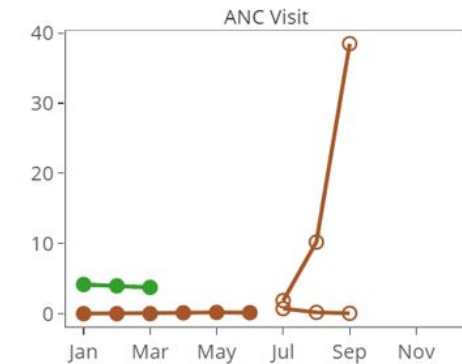
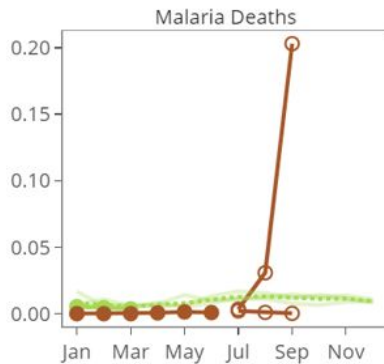
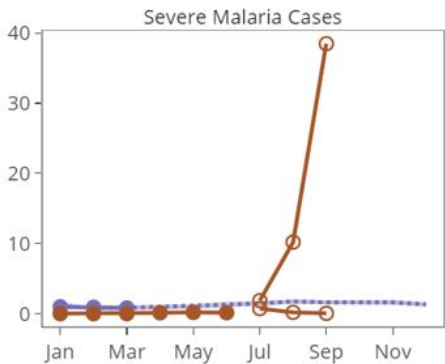
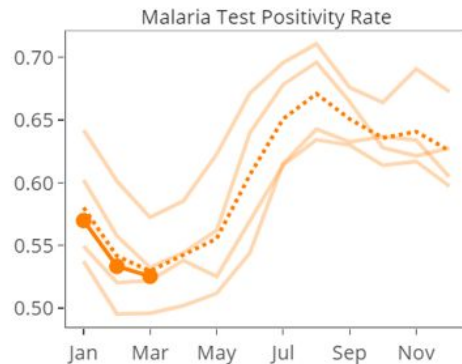
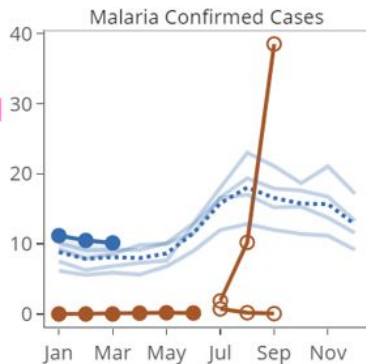


Country XYZ



Long-term mean

Cases per 1K people





COVID-19 and Malaria Tracking and Vulnerability Tool

Info **Malaria Impact** COVID-19 Vulnerability



National <

Sub-National <

Select Country

Country XYZ

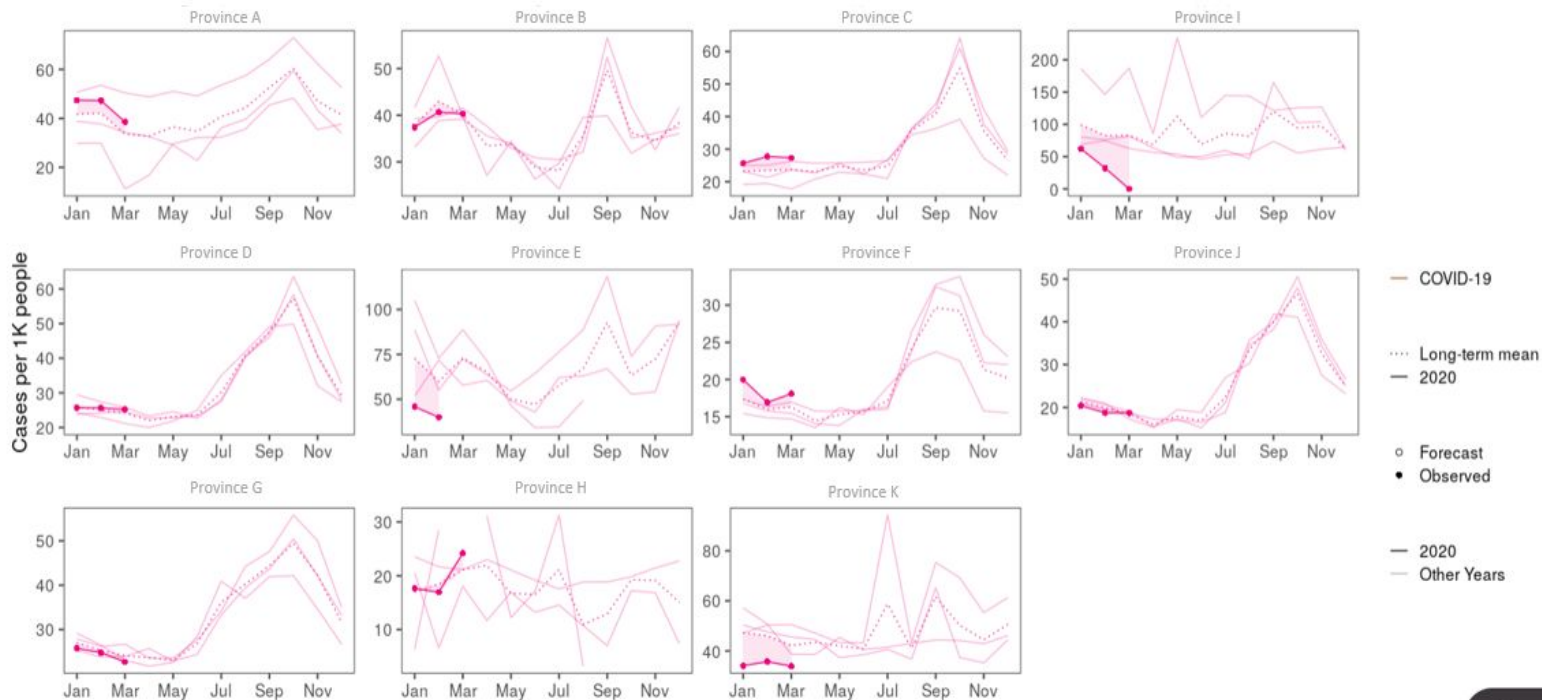
Plot by:

Admin. Level 1

Indicator

All Cause Consultation

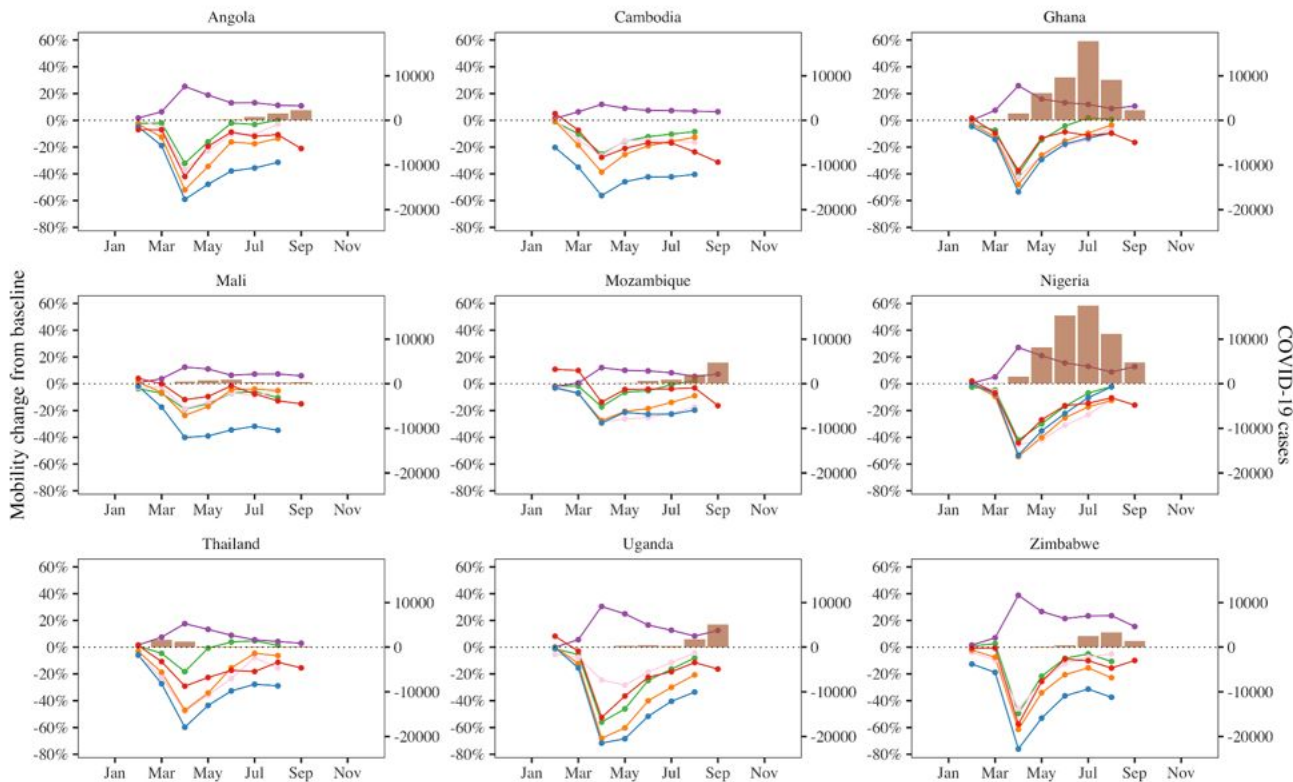
Country XYZ Consultation





Lockdown Implementation: Population Mobility

Mobility and COVID-19 Cases



- Google community mobility data as a proxy for population movement
- Measures *how the visitors to (or time spent in) categorized places change compared to baseline days*
- In most countries, mobility was at the lowest in April
- Baseline: Jan 3 - Feb 6, 2020

■ COVID-19 Cases

Mobility category

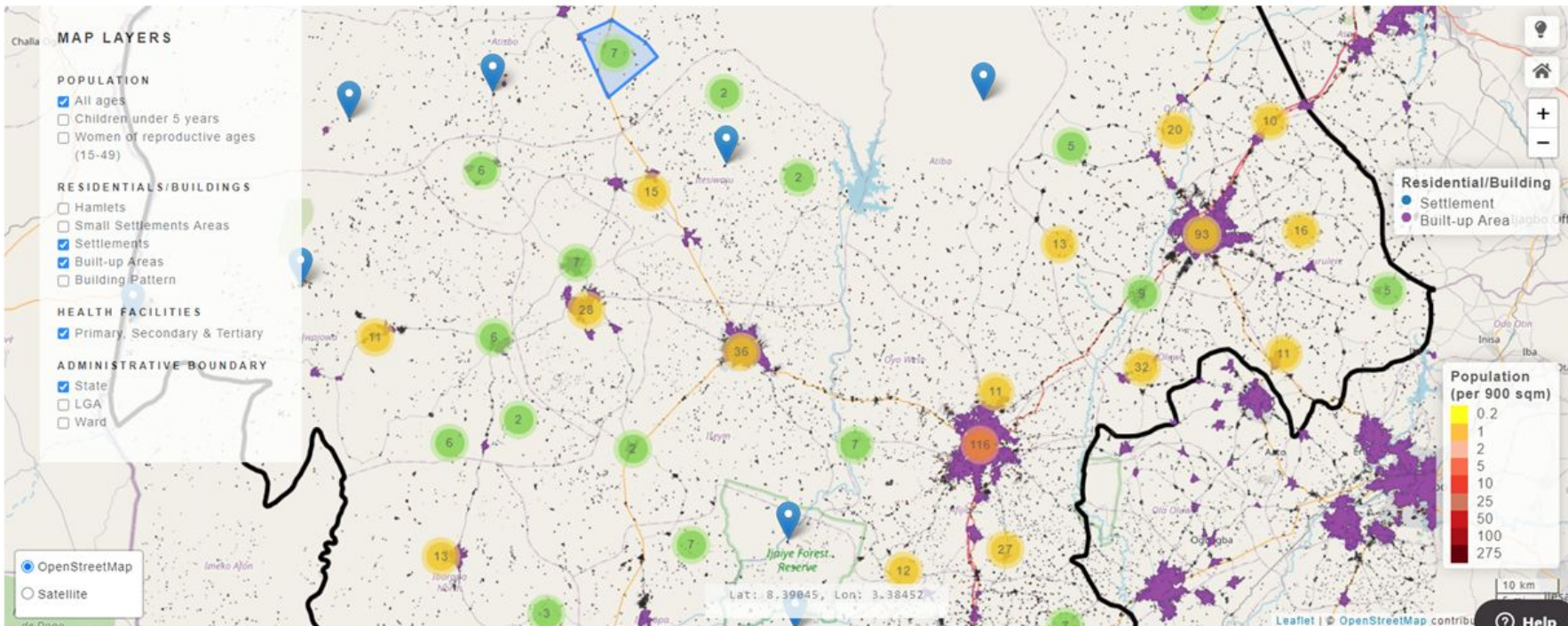
- residential
- workplaces
- transit stations
- grocery and pharmacy
- retail and recreation
- parks



POPMAP

ABOUT

MAP



Digital Community Health Initiative

Strengthen the delivery of health services at the community level in PMI countries, by investing in the scale-up of digitally-enabled community health platforms that:*

1. Equip frontline workers with connected mobile tools to increase the effectiveness of case management (e.g. job aids and diagnostic tools/readers)
2. Improve access to near real-time, high-quality community data (that flows directly into country HMIS)
3. Catalyze a cultural shift in the use of community data for decision making across all levels of the healthcare system
4. Facilitate the integration of services at the community level in alignment with the holistic needs and health goals of each country
5. Integrate and empower CHWs as a valued aspect of the national health system

Community health defined as “lowest level health worker that’s able to diagnose and treat malaria” in each country

*Starting in 3 pioneer countries

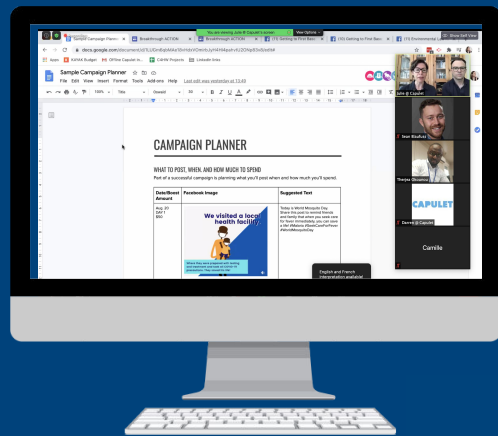
Digital Community Health Foundational Assessment

To understand the digital ecosystem in all 27 PMI-supported countries:

1. Landscape of digital community tools that have achieved some level of scale in malaria and other health areas
2. Role of community data in decision making
3. Data flow process from the community into the HIS
4. Digital readiness level of users in the community
5. Enabling infrastructure
6. How community and malaria data fit within the national eHealth architecture

And inform the scaling approach in 3 pioneering countries, as well as other strategic country investments in Digital Community Health

PMI Facebook Collaboration



- Conducted interactive, **eight-week training series** with PMI SBC Partner (Breakthrough ACTION) from eleven countries.
- Extended activity reach by inviting **participation from civil society organizations** through the **RBM Partnership to End Malaria SBC Working Group**.
- Provided **advertising credits** to all participating Breakthrough ACTION Teams and several civil society organizations.
- Developed a robust, **suite of customizable creative content** for use during a two-week campaign, including an animated video, infographics, social cards, and illustrations.
- Launched **two-week campaign** to promote care-seeking for fever on World Mosquito Day.
- Reached more than **two million Facebook users** in sub-Saharan Africa during the first two weeks of the campaign.

PMI

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CDC
U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

THANK YOU