

FCU-Global Fund Brief

A Publication of the Funds Coordination Unit of The Global Fund Grants – Issue 1- July 2021

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Welcome!...to the maiden issue of the FCU-Global Fund Brief. In the midst of these rather turbulent times, we realize that the need to connect and share current and actual information is greater than ever. This monthly publication seeks to provide a regular update of matters that pertain to the oversight function of the Funds Coordination Unit of the Global Fund Grants.

Quick facts...

This being the first issue, it was deemed necessary to provide information on what the Funds Coordination Unit (FCU) is all about. The overall objective of the Funds Coordination Unit of the Global Fund Grants is to support the Ministry of Finance, Planning and Economic Development (MoFPED) as the Public Sector Principal Recipient (PR) to ensure effective and efficient use of the Global Fund resources. This function is exercised through the Public Financial Management (PFM) Reforms Coordination Unit (RCU). Programmatic implementation of the grants is handled by the Ministry of Health by Program Managers in the three Disease Areas: HIV/AIDS, Tuberculosis and Malaria.

The Global Fund to Fight AIDS, Tuberculosis and Malaria is an international partnership that provides grants to lower income countries with high disease burden such as Uganda. The Global Fund specifically focuses on prevention and control of HIV/AIDS, Malaria and Tuberculosis.

Effective response to the Pandemic holds key to progress in fight against HIV, TB and Malaria



The COVID-19 pandemic has shifted the paradigm in almost every sphere of life. In Uganda, the second wave of the pandemic has literally erased lingering doubts about its disruptive and destructive effects. The significant progress that had been made by Uganda in the fight against HIV, TB and Malaria is also under threat. Due to the pandemic, Uganda and other countries are likely to register increases in deaths and infections due to HIV, TB and Malaria. According to Global Fund projections, in some countries, the indirect death toll from incremental deaths due to HIV, TB and Malaria might exceed the direct death toll from COVID-19. In Uganda for instance, the lockdown and restrictions on public movements have proved to be a barrier towards accessing health services for HIV, TB and Malaria. Laxity in adapting HIV, TB and Malaria programs towards mitigating the impact of COVID-19 could translate into the unfortunate reversal of the progress that has been made in the fight against these diseases.

There is every reason to adapt and effectively respond to the COVID-19 pandemic in order to safeguard earlier progress and its associated heavy investment in the fight against HIV, TB and Malaria. In response to the current realities, according to the Global Fund, countries and communities are innovating fresh approaches to enable services to be implemented safely. Some of these include virtual observation of TB treatment via smartphone applications, multiple-months provision of treatment to people with HIV and TB, door-to-door delivery of critical supplies like mosquito nets by program staff and health workers with personal protective equipment, technical support for online services, and adjustment of procurement and supply systems to enable longer-term prescription of drugs.

FCU conducts induction training for new technical staff

In a bid to strengthen its oversight function, the Funds Coordination Unit of the Global Fund Grants recently enhanced its operations with a range of new technical staff in the areas of Finance, Administration, Risk management, Purchasing and Logistics Management, Communications and Monitoring and Evaluation.

The team joined the FCU on 1 July 2021 and had induction training for the period 1-16 July 2021. The training addressed a number of themes that are closely linked to attaining effectiveness and efficiency within the interventions that are supported by Global Fund resources in Uganda. It was facilitated by officials from the Global Fund Country Team, the Uganda Country Coordinating Mechanism (CCM) of the Global Fund, the Ministry of Health and the Ministry of Finance, Planning and Economic Development among, others.

Some of the induction training themes included: Key provisions in the Grants implementation manual, the role of the Country Coordinating Mechanism (CCM) and its portfolio, Update on Health System strengthening, Focus on the Global Fund disease programmes, financial management oversight by the FCU, Communication and visibility in Public Sector programmes, Monitoring and Evaluation and the Country Systems, annual planning cycles among others. Most speakers highlighted the disruptive effects of the COVID-19 pandemic and the recent lockdown in Uganda, which threatens to slow down the fight against the three diseases. They reiterated the need to exercise vigilance and ensure that the pandemic does not derail the impressive gains that have been made by the Global Fund's investment in the fight against HIV/AIDS, Tuberculosis and Malaria. The speakers also commended the Global Fund's increased contribution towards helping to relieve the strain on Uganda's health system especially in the face of the current COVID-19 pandemic.

IN BRIEF...

Emergency interventions expenditure approved

According to official documents released early in July, the Uganda Cabinet approved Shs600billion for supplementary expenditure, of which 371.7 billion will finance COVID-19 emergency interventions under various institutions in Quarter 1, as well as Ushs2,283 billion approved to cater contingencies in FY 2021/22.

COVID-19 Response Mechanism additional funding for Uganda

The Global Fund recently (July 2021) approved USD126.8m of additional investments towards Uganda's COVID-19 Response Mechanism. The Global Fund also approved the use of USD7.7m from the remaining COVID-19 Response Mechanism funding awarded to Uganda in 2020, for the period after January 2021-December 2023. This brings the total contribution of the Global Fund towards Uganda's COVID-19 response award (including all contributions received to date) to USD178.8m.

Shilling appreciates in face increased inflows

The Ugandan Shilling continued to appreciate during the month of June 2021, with a 0.3% gain against the USD, trading at an average mid-rate of Shs 3,540/USD in June from Shs 3,553/USD recorded in May 2021. The appreciation was on account of the increased inflows mainly from offshore investors into the government securities market.

System efficiencies could curb pain of high medical costs



A health worker administers a vaccine to an elderly woman. Improving the health system will protect the public from high medical bills.

Following the onset of the second wave of Covid-19 pandemic in Uganda, a number of hospitals were found to be charging between Shs2m and Shs5m per day to treat a critically ill patient. On average, a patient spends 14 to 30 days in hospital, depending on the severity of the disease, according to medical experts. This implies that a critically ill patient spends between Shs60m and Shs160m or more within an average of 14 to 30 days. Spending that amount is way beyond what most Ugandans can afford. In a media interview conducted in the early stages of Uganda's COVID 19 second wave, Health Minister, Dr Jane Ruth Aceng said the actions of hospitals hiking medical bills for Covid-19 patients in Intensive Care Units (ICU) were unfortunate. She said that hospitals ought to apologise to the public, arguing that it was not time for them to make money. **“With COVID-19 we opened up to the private sector. They are charging up to Shs5 million a day. Some families have paid up to Shs200 million and they have still lost their loved ones. It is completely unacceptable,”** Ms Aceng said in a media interview. Building resilient systems of health that are effectively linked to local systems will go a long way in creating financial risk protection for patients and their care givers. This will also relieve and or shield patients from the pain of high medical costs regardless of whether they are dealing with the ferocity of COVID-19 or any other disease. Unless addressed effectively, the gaps and inefficiencies within the health systems will make it easy for unscrupulous health care providers to exploit to patients and their loved ones.

Quick tips on remote working

- Ensure you have the required equipment to work from home/remotely (PC/laptop, data)
- Continuously connect with your supervisors, colleagues and all relevant stakeholders
- Design a basic workspace (desk and chair). The work-space should be known to your family and should be respected accordingly
- Let your family and friends know your working hours. This will help you minimize interruptions

