

CCM Meeting Minutes

INPUT FIELDS INDICATED BY YELLOW BOXES



MEETING DETAILS											
COUNTRY (CCM)		România			TOTAL NUMBER OF <u>VOTING</u> MEMBERS PRESENT (INCLUDING ALTERNATES)				19		
MEETING NUMBER (if applicable)		3 (since RHRN is organizing the CCM meetings)									
DATE (dd.mm.yy)		14.02.2014			TOTAL NUMBER OF <u>NON-CCM</u> MEMBERS / OBSERVERS PRESENT (INCLUDING CCM SECRETARIAT STAFF)				2		
DETAILS OF PERSON WHO CHAIRED THE MEETING											
HIS / HER NAME & ORGANISATION		First name	Iulian			QUORUM FOR MEETING WAS ACHIEVED (yes or no)				yes	
		Family name	Petre			DURATION OF THE MEETING (in hours)				2,40	
		Organization	UNOPA			VENUE / LOCATION		INBI Matei Balş			
HIS / HER ROLE ON CCM (Place 'X' in the relevant box)		Chair				MEETING TYPE (Place 'X' in the relevant box)		Regular CCM meeting		X	
		Vice-Chair		x				Extraordinary meeting			
		CCM member						Committee meeting			
		Alternate									
HIS / HER SECTOR* (Place 'X' in the relevant box)								GLOBAL FUND SECRETARIAT / LFA ATTENDANCE AT THE MEETING (Place 'X' in the relevant box)		LFA	
GOV	MLBL	NGO	EDU	PLWD	KAP	FBO	PS	FPM / PO			
				x				OTHER		X	
								NONE			

LEGEND FOR SECTOR*				
GOV	Government		PLWD	People Living with and/or Affected by the Three Diseases
MLBL	Multilateral and Bilateral Development Partners in Country		KAP	People Representing 'Key Affected Populations'
NGO	Non-Governmental & Community-Based Organizations		FBO	Religious / Faith-based Organizations
EDU	Academic / Educational Sector		PS	Private Sector / Professional Associations / Business Coalitions

SELECT A SUITABLE CATEGORY FOR EACH AGENDA ITEM (Place 'X' in the relevant box)																
GOVERNANCE OF THE CCM, PROPOSALS & GRANT MANAGEMENT RELATED TOPICS																
AGENDA ITEM No.	WRITE THE TITLE OF EACH AGENDA ITEM / TOPIC BELOW	Review progress, decision points of last meeting – Summary Decisions	Review CCM annual work plans / budget	Conflict of Interest / Mitigation	CCM member renewals /appointments	Constituencies engagement	CCM Communications / consultations with in-country stakeholders	Gender issues	Proposal development	PR / SR selection / assessment / issues	Grant Consolidation	Grant Negotiations / Agreement	Oversight (PUDRs, management actions, LFA debrief, audits)	Request for continued funding / periodic review / phase II / grant consolidation / closures	TA solicitation / progress	Other
AGENDA ITEM #1	Eligibility criteria for financing in the GFATM's NFM											x				
AGENDA ITEM #2	TB grant – PR report									x						
AGENDA ITEM #3	GFATM CCM Romania – funding request													x		
AGENDA ITEM #4	Other topics – New Funding Mechanism								x							
AGENDA ITEM #5																

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

MINUTES OF EACH AGENDA ITEM	
AGENDA ITEM #1	Eligibility criteria for financing in the GFATM's NFM
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)	
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >	
yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED	
<ul style="list-style-type: none"> - Compiling a list of political barriers in Romania concerning HIV treatment and prevention - HIV – accessing NFM (NGO rule – concept note created by the NGO applicant) - TB – accessing NFM (concept note created by the CCM) 	
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM	
<i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>	
GOV	
MLBL	
NGO	<p>ARAS</p> <ul style="list-style-type: none"> - There have been adopted no anti-HIV national strategy, national plan and budgeting dedicated to the HIV issue (prevention, testing, treatment) – this is the most important barrier: there is no interest for such matters in the health policies - In the 2014 national health program there is no mention of prevention, harm reduction, nothing about MSM - There is no data on the SW population - Another political barrier: the financial reporting model of the target-group (the people without IDs, those without insurance, and, by consequence, that do not have access to services) by ID copies or signatures – the modification of Law 95/2006 (http://www.ms.ro/documente/Lege%2095%2013.02.2014_895_1776.pdf) by emergency government order – so the proposals for modification were disregarded (!! On the Ministry of Health website, the deadline for proposals is 26.02.2014); there are people that cannot access services because of this <p>HealthAid Romania</p> <ul style="list-style-type: none"> - Concerning the financial policy: the NGOs cannot get back the VAT, as it happens abroad (money that may be used for services) - The existence of the advocacy component directed to bring down the barriers <p>RAA</p> <ul style="list-style-type: none"> - We must assure that all the conditions for NGO rule are met, especially the one concerning the political barriers (arguments); other funding sources are unreliable; we must compile a list of barriers, with examples gathered from all CCM members - There is no definition of political barriers in the guide – we may consider them as being a whole comprising legal, financial and political factors that lead to the lack of services that are necessary - Nicolas Farcy's visit – meeting with NGOs activating in the area of HIV prevention in drug users' populations; the agenda will be sent to CCM members after the meeting - At first sight, we cannot assert that there is a lack of political will in the political discourse (see the NAA strategy – even if NAA itself is underfinanced) <p>NGO</p> <ul style="list-style-type: none"> - Political barrier: the national AIDS strategy for 2008-2013 was never adopted, being blocked in the bureaucracy machine existing at the inter-ministry level - There was never an operational program in public health for the allocation 2007-2013 – MoH is not a management entity like the other ministries - NGOs cannot receive funds directly from the MoH - Decision-makers have been warned (i.e. TB: when the budget for the TB control national plan was adopted, the funds allotted to it were very scarce; when asked about the reason behind all this (only the national MDR plan has allotted 5 million a year – and now there are only 4 million for the whole program), MoH points to the Ministry of Finances and the government) - We have no budgeted multiannual national plans (the needs are not determined in any way) – an important barrier - The eligibility criteria for HIV are either a national prevalence of 1-2%, either more than 5% in MARP populations: in the drug users' population the prevalence is 7% confirmed cases (from 2005 on) - NGOs have been warning for 4 years on the necessity of assuring the HIV prevention services' sustainability and the results on the decision-making level have been null – no funds allotted, no services' programs, no financing for national programs - In the national health strategy there is mentioned as a strategic direction the prevention in the vulnerable groups – but it's just a text without actual support – MoH declares that the implementing plans for the strategy are in works and that they theoretically should have indicators and budget - We should have fully costed national plans with financial targets - Concerning TB, there should be essentially the same steps to be taken for financing as always (see <i>Resource Book for Applicants</i> on the GFATM website); the GFATM grant (TFM) stands until September 2014, the Norway project and the supplemental funds from the Norwegian source will start this year, but there will be for sure a gap in treatment funding; for a future NFM application (the concept note) we should have as priorities ensuring the treatment for MDR-TB, consumables for rapid diagnosis, DOT and a series of interventions for treatment adherence, active screening in the vulnerable groups, etc. - We will receive by the end of March from GFATM a letter with the budget allotted (<i>indicative funding</i>); we will know then if we are eligible also for <i>incentive funding</i>

	<ul style="list-style-type: none"> - We don't not know the funding limit for HIV through NGO rule or for TB through CCM (the condition for TB is a budgeted multiannual plan) - We should start working on the application for HIV and TB (the concept notes) as soon as possible (we hope that there will be possible a consortium application for HIV through NGO rule) <p>RHRN</p> <ul style="list-style-type: none"> - The evaluation of public policies: we have a problem (the epidemic), a set of measures for solving it and the results of those measures (by setting them side by side we should be able to discern the efficiency of these policies, the political will and the political barriers) - The health policies: the population health is the sole responsibility of each EU member, with one exception – the epidemics that transcend the borders become a EU issue (the Lisbon Treaty – art. 168): the Romanian communities of drug users in Italy and Spain are quite considerable (there are in Spain organizations that publish information on overdose in Romanian language for the Romanian community) – we must assert the level of migration and if this may be considered an European issue (that would bring in the EC) - In 2010 – MoH issued a press release stating that they know about the HIV problem and that they will take measure to solve it - The governmental support for the program (contributing with de 60%, not just issuing declarations of good will) may be problematic because is very improbable that we will see any decision in this respect - The possible NGO competition may be solved by coordination and capacity criteria <p>Youth for Youth</p> <ul style="list-style-type: none"> - The needs of all organizations must be coordinated; if possible, we must resurrect the old advocacy group, because we may create a partnership agreement that will not represent the needs of the target populations (coming from the fact that the decision-makers do not have information on these populations' condition) – a clear, documented message
EDU	<p>The National Institute for Infectious Diseases “M. Balș” (INBI Bals), Bucharest</p> <ul style="list-style-type: none"> - In 2011, after reporting the HIV crisis, there was no solution from EU or EC - After the MoH protest, there they gave syringes to the NGOs that took upon themselves the distribution on their own expense - The syringes' exchange was commuted this year to the mental health area („practically, they buried it”) - From the Norwegian funds we have money for one million syringes (just for the items, and no funds for distribution) - In the national anti-AIDS strategy for 2008-2013, the MoH has not accessed POSDRU funds, but for trainings (in Greece, they asked for specialized interventions in the populations at risk) - Although we have a law on health insurance, the National Health Insurance Fund does not have a separate budget, but a consolidated one, and has never received more than 4.7% of GDP (an exceptional situation about 15 years ago) - In Greece, there is a decline in the epidemic, in Romania the situation is the same as before - The superposing of TB and HIV in drug users populations - For about 14 months, the NAA was actually disbanded in 2009 (it was called “restructuring”) - In 2 years we may have 100% HIV positive drug users if we do not distribute 4 million syringes a year - The study from Greece on drug users shows that the main risk for getting infected with HIV lies with the homeless people - The Government Order 422/2013 that alters the reporting of clients by making mandatory their signature for accessing services (http://www.ms.gov.ro/documente/ordin%20modif%20422%20programe_796_1577.pdf)
PLWD	<p>UNOPA</p> <ul style="list-style-type: none"> - Conclusion: in Romania there are political barriers in this area and we need to apply for the NGO rule funding - On HIV, the CCM is no longer an intermediary – the NGOs will negotiate directly with GFATM
FBO	
KAP	

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

- The TB application will be developed by a working group in April and May, RAA and PNCT must be involved, on the same route as the application for the TFM grant.

ACTION(S)	KEY PERSON RESPONSIBLE	DUE DATE
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Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.



DECISION MAKING



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

MINUTES OF EACH AGENDA ITEM

AGENDA ITEM #2	TB grant – PR report
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CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >		Yes	
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED			
 Report_PR_TB  ANNEX 11_CCM Grant_CCM_FebruarOversight Plan for G			
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM <i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>			
GOV			
MLBL			
NGO	RAA <ul style="list-style-type: none"> - Until now, the CCM had just acknowledged the PR's reports, but has not made any oversight on the delivery of services in the locations where the projects have been implemented, the CCM had had no resources to finance supervising visits from its members - The letters of information from N. Farcy (is everybody receiving them?) - Although the coordinator of the National Prisons Administration's project sends invitations for participating in different activities to the CCM members, supposing that there are such members willing to monitor the prisons, these invitations cannot be followed as long as there are no funds in the grant budget for this kind of visits. 		
EDU	The Pneumology Institute "Marius Nasta" Bucharest <ul style="list-style-type: none"> - There is no money and medication; most counties have no drugs left when the program passed from the National Health Insurance Fund (this move meant also the loss of drug stocks that had to be maintained according to the technical regulations in implementing the programs); the remaining drug stocks are being used by being transferred between medical units - „We are told that the money must be spent by the end of July; on the other hand, we are told that this is all the money we get” – in the MoH nobody knows anything 		
PLWD	UNOPA <ul style="list-style-type: none"> - There is an invitation from the National Prisons Administration for monitoring and assessing 		
FBO			
KAP			
DECISION(S) <i>Summarize the decision in the section below</i>			
No decision.			
ACTION(S)		KEY PERSON RESPONSIBLE	
		DUE DATE	
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>			
DECISION MAKING			
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS	
	VOTING	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS
			SECRET BALLOT
	ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF THE DECISION</u>		>
	ENTER THE NUMBER OF MEMBERS <u>AGAINST THE DECISION</u>		>
ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u>		>	
*Consensus is general or widespread agreement by all members of a group.			
MINUTES OF EACH AGENDA ITEM			
AGENDA ITEM #3	GFATM CCM Romania – funding request		
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)			
The RHN representative, as a member of the CCM secretariat, has abstained from voting.			

WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >		Yes		
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED				
 Cerere de finanțare CNC-FG România.ppt				
SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM <i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>				
GOV				
MLBL				
NGO	RHRN - The application must be signed by all the members			
EDU				
PLWD	UNOPA - The decisions taken by the CCM should be recorded in signed documents			
FBO				
KAP				
DECISION(S) <i>Summarize the decision in the section below</i>				
- Vote 1: empowering RHRN by direct voting as CCM secretariat – agreement (unanimity) - Vote 2: the funding request in the present form is endorsed – agreement (unanimity)				
ACTION(S)		KEY PERSON RESPONSIBLE		
		DUE DATE		
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>				
CCM members signatures endorsing the CCM Funding Request to be collected.		Valentin Simionov		
		Next CCM		
DECISION MAKING				
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*		IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS	
	VOTING	x	VOTING METHOD (Place 'X' in the relevant box)	SHOW OF HANDS
				SECRET BALLOT
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION	> 18
			ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION	>
*Consensus is general or widespread agreement by all members of a group.			ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u>	> 1
MINUTES OF EACH AGENDA ITEM				
AGENDA ITEM #4	Other topics – New Funding Mechanism			
CONFLICT OF INTEREST. (List below the names of members / alternates who must abstain from discussions and decisions)				
WAS THERE STILL A QUORUM AFTER MEMBERS' RECUSAL DUE TO DECLARED CONFLICTS OF INTEREST (yes or no) >				
SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED				
 New Funding Model_Romania_SIN				




SUMMARY OF SPECIFIC CONTRIBUTIONS / CONCERNS / ISSUES AND RECOMMENDATIONS RAISED BY CONSTITUENCIES ON THE CCM			
<i>Please summarize the respective constituencies' contributions to the discussion in the spaces provided.</i>			
GOV			
MLBL			
NGO	<p>ARAS:</p> <ul style="list-style-type: none"> Proposes a new regulation in the CCM rules of procedure: periodically, the CCM should remind the public that it is opened for new members from affected/concerned groups and populations; Political barrier – the statement of the former minister of culture, when referring to the national HIV/AIDS program budget <p>RAA:</p> <ul style="list-style-type: none"> GFATM requirements from the CCM: slides 20-30 from the New Funding Model presentation (attached)– requirement 3: the CCM has to prove that it had implemented the „grant oversight”, including by visiting project implementation locations – according to the monitoring plan approved for the TFM; requirement 4: weak representation of HIV/TB affected populations; better representation of the concerned categories; the meaningful participation of key affected populations (PLHIV, former TB patients, other affected populations) has to be proven – percentages of key affected population out of the total CCM constituency having participating in the CCM meetings and decision making etc.; requirement 5: (difficult to prove) member organisations must provide proof of their legitimate representations of their constituency (at this point, only UNOPA complies with this requirement); other requirements for the CCM concerning the TFM implementation: establishing an oversight committee is recommended; there has to be no conflict of interests in the selection of the PR and the SRs. The Secretariat should invite the CCM members to do the monitoring and evaluation of the oversight plan (already approved). The target groups must be consulted (and we have to prove this) in the elaboration of the concept note for the NFM (similar to the consultations for the TFM application – focus groups with groups of TB patients were organized) One of the Secretariat roles is to clearly present the CCM role and mission to the CCM members: all needed information about the role and tasks of the Secretariat are available on the GF's website: http://www.theglobalfund.org/en/ccm/ and http://www.theglobalfund.org/en/ccm/guidelines/ (CCM Eligibility Requirements, Minimum Standards & Updated Guidelines). the Oversight plan elaborated and approved by the CCM and sent to GF was part of the funding request for the TFM. The plan should be implemented by the CCM Secretariat. Besides the periodical information and reporting from the PR, no other activities could be implemented (e.g. site visits) due to the lack of CCM funds. The documents referring to the New Funding Model are available on the GFATM website – section NFM must be carefully read. Suggestion: the document referring to political barriers (eligibility under NGO Rule, point f.) must be sent to Nicolas Farcy: it can be a table with two columns listing the political barriers and the supporting documents for each barrier (e.g. articles, decisions etc.); political will does not stand in declarations but actions. <p>Y4Y</p> <ul style="list-style-type: none"> We must pay attention to new organisations created in the last years in order to access the funds. 		
EDU			
PLWD	<p>UNOPA:</p> <ul style="list-style-type: none"> In case CCM members or invited guests cannot attend the meetings, they can attend the meetings online (teleconference) We must check the CCM rules of procedure (reviewed 2 years ago) provisions on the conflict of interests; we must look for potential flaws in the CCM rules of procedure. 		
FBO			
KAP			
DECISION(S) <i>Summarize the decision in the section below</i>			
<ul style="list-style-type: none"> Announcement for admitting new members. 			
ACTION(S)		KEY PERSON RESPONSIBLE	DUE DATE
<i>Summarize below any actions to be undertaken indicating who is responsible for the action and by when the action should be completed.</i>			
DECISION MAKING			
MODE OF DECISION MAKING (Place 'X' in the relevant box)	CONSENSUS*	x	IF 'VOTING' WAS SELECTED, INDICATE METHOD AND RESULTS
	VOTING		VOTING METHOD (Place 'X' in the relevant box)
			SHOW OF HANDS
			SECRET BALLOT
			ENTER THE NUMBER OF MEMBERS <u>IN FAVOUR OF</u> THE DECISION
		ENTER THE NUMBER OF MEMBERS <u>AGAINST</u> THE DECISION	>
		ENTER THE NUMBER OF VOTING CCM MEMBERS <u>WHO ABSTAINED</u>	>
*Consensus is general or widespread agreement by all members of a group.			

SUMMARY OF DECISIONS & ACTION POINTS			
AGENDA ITEM NUMBER	WRITE IN DETAIL THE DECISIONS & ACTION POINTS BELOW	KEY PERSON RESPONSIBLE	DUE DATE
AGENDA ITEM #1	The TB application will be developed by a working group in April and May, RAA and PNCT must be involved, on the same route as the application for the TFM grant.		
AGENDA ITEM #3	Empowering RHRN by direct voting as CCM secretariat.		
AGENDA ITEM #3	The funding request in the present form is endorsed.		
AGENDA ITEM #3	CCM members signatures endorsing the CCM Funding Request to be collected.	Valentin Simionov	NEXT CCM
AGENDA ITEM #4	Announcement for admitting new members.		

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

NEXT MEETING (INCLUDES OUTSTANDING AGENDA ITEMS NOT COMPLETED DURING CURRENT MEETING)	
TIME, DATE, VENUE OF NEXT MEETING (dd.mm.yy)	7/8.04.2014
PROPOSED AGENDA FOR NEXT MEETING	WRITE THE PROPOSED AGENDA ITEMS IN THE SPACES PROVIDED
AGENDA ITEM #1	Recap on decision points of previous meetings
AGENDA ITEM #2	
AGENDA ITEM #3	
AGENDA ITEM #4	
AGENDA ITEM #5	

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

SUPPORTING DOCUMENTATION	Place an 'X' in the appropriate box	
ANNEXES ATTACHED TO THE MEETING MINUTES	Yes	No
ATTENDANCE LIST	 lista participantilor.doc	
AGENDA	 Agenda.docx	
OTHER SUPPORTING DOCUMENTS	X	
IF 'OTHER', PLEASE LIST BELOW:		
 Terms of reference CCM secretariat_14.(Terms of reference: CCM Secretary		

Cerere de finanțare CNC-FG România.ppt
Cerere de finanțare CNC-FG România

ccm romania-2013_new_.pdf
CCM Funding request

ANNEX 11_CCM Oversight Plan for G.pdf
ANNEX 11_CCM Oversight Plan for G

Report_PR_TB Grant_CCM_Februar.ppt
Report_PR_TB Grant_CCM_Februar

New Funding Model_Romania_SIN.ppt
New Funding Model_Romania_SIN

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

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

GLOSSARY FOR ACRONYMS USED IN THE MINUTES:	
ACROYNM	MEANING
NAA	National Antidrug Agency

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

CCM MINUTES PREPARED BY:					
TYPE / PRINT NAME	>	Valentin Simionov	DATE	>	18/02/2014
FUNCTION	>	CCM secretariat	SIGNATURE	>	

CCM MINUTES APPROVAL:			
APPROVED BY (NAME)	>	Iulian Petre	DATE > 28/02/2014
		CCM vice-chair	SIGNATURE >