

Terms of Reference

TB REACH Programme Steering Group (PSG)

1. Background

The TB REACH initiative was established in 2010 with an initial five-year award from Global Affairs Canada (GAC), and later received support from UNITAID, the UN Foundation and the Lilly MDR-TB Partnership. TB REACH provides grants to partners in lower-income and/or high TB burden countries to test innovative and well thought-out, yet unproven strategies and technologies for improving TB detection and service delivery on a large, programmatic scale. In line with the call to action outlined in the *Global Plan to End TB 2016-2020*, TB REACH grants aim:

1. To increase the number of people with TB who are diagnosed, treated and reported to National TB Programs (NTPs),
2. To decrease the time it takes someone with TB to receive appropriate treatment, and
3. To improve the outcomes of people started on anti-TB treatment.

The TB REACH initiative combines open, but targeted calls for proposals, fast-track financing and rigorous, external monitoring and evaluation (M&E) to rapidly produce results. Other donor agencies and/or national governments can then scale-up the successful approaches piloted by TB REACH to maximize their own investments and to accelerate progress in the fight against TB.

Between 2010 and 2016, four calls for proposals were launched, which resulted in the provision of 142 grants in 46 countries worth over USD 95 million. In close collaboration with NTPs, TB REACH grantees diagnosed and treated over two million TB patients in project areas and saved over 600,000 lives. Dozens of successful strategies piloted by TB REACH were incorporated into 2015-17 Concept Notes which were subsequently approved for funding by the Global Fund to Fight AIDS, Tuberculosis and Malaria.

In 2016, GAC approved a second five-year grant for TB REACH. With co-financing from the Bill and Melinda Gates Foundation, the Stop TB Partnership will launch four calls for proposals through 2020.

2. Functions

The TB REACH PSG will provide general oversight and advice to the Stop TB Partnership Coordinating Board, the Stop TB Partnership Executive Director and Office, and the TB REACH team regarding programme and organizational development in order to help to improve the relevance, impact and sustainability of the TB REACH initiative. The TB REACH PSG will have the following functions:

- 2.1 Discuss and make high-level recommendations on the objectives, funding priorities, and evaluation of the TB REACH initiative in order to promote innovation in TB service delivery and to accelerate progress in the fight against TB in line with the *Global Plan to End TB 2016-2020*;
- 2.2 Discuss and make recommendations on any matter involving the governance and accountability processes of the TB REACH initiative;
- 2.3 Review external evaluation reports and when necessary, make recommendations to increase the effectiveness, efficiency, and impact of the TB REACH initiative;
- 2.4 Discuss and make recommendations on the sustainability of the TB REACH initiative, including the building of political support and diversification of its donor base; and
- 2.5 Discuss and make recommendations on the linkage of successful strategies and technologies piloted by TB REACH to scale-up funding from national government, the private sector and/or

other international donors, particularly the Global Fund to Fight AIDS, Tuberculosis and Malaria.

3. Composition

- 3.1 The TB REACH PSG shall have no less than 10 and no more than 15 members. Individuals from the Stop TB Partnership, UNOPS and TB REACH's external monitoring and evaluation team will participate in PSG meetings, but will not be considered PSG members (i.e. no voting rights).
- 3.2 The Stop TB Partnership's Executive Director will nominate individuals to become a member of the TB REACH PSG. Technical expertise, strategic relevance, gender balance and geographic representation will be taken into account when nominating individuals. Each donor government and/or agency providing at least USD 5 million in funding for the TB REACH initiative will be represented by one PSG member each.
- 3.3 TB REACH PSG members will serve in an individual capacity, not as representatives of any organization by which they are employed, except donor country/agency representatives.
- 3.4 TB REACH PSG members will serve a two-year term and at the end of a term, will be eligible for re-nomination by the Stop TB Partnership's Executive Director to serve an additional two-year term. TB REACH PSG members may serve an unlimited number of terms.
- 3.5 The TB REACH PSG will be led by a Chair, selected by PSG members. The Chair will serve a two-year term and may be re-selected by PSG members to serve one additional two-year term.
- 3.6 The Stop TB Partnership Executive Director may at any time, by giving advanced written notice, end the term of a PSG member.
- 3.7 The working language of the TB REACH PSG will be English.

4. Operations

- 4.1 The TB REACH team will organize an in-person PSG meeting once per year. Ad hoc teleconference calls will be organized between in-person meetings, as deemed necessary by the TB REACH team and/or PSG Chair.
- 4.2 The date and location of in-person PSG meetings will be determined by the TB REACH team, in consultation with PSG members. In-person PSG meetings will be held in advance of the launch of a call for proposals, will usually not exceed one day, and will usually be organized around other events with global participation.
- 4.3 The Stop TB Partnership will cover the travel costs for PSG members to attend in-person PSG meetings on a case by case basis. The Stop TB Partnership will make reasonable efforts to ensure efficiency of cost, for example, if a PSG member will already travel to the Union World Conference on Lung Health using another funding source, we will ask him/her to organize that travel to accommodate the in-person PSG meeting while only providing DSA for the additional days of travel and not the airfare.
- 4.4 The TB REACH PSG will prepare a report on its meetings with support from the TB REACH team. The report will be submitted to the Stop TB Partnership's Executive Director and will be shared with the Stop TB Partnership Coordinating Board and made publically available via the TB REACH section of the Stop TB Partnership website.
- 4.5 The TB REACH PSG will make a reasonable effort to reach all recommendations/decisions by consensus based on informal polling (e.g. through a show of hands). If necessary, the TB REACH PSG will be asked to vote on a recommendation, and a simple majority of voting

members present is needed to pass a recommendation. Should voting result in a tie, the recommendation will be made at the discretion of the PSG Chair.

- 4.6 Conflicts of interest can create the perception that a PSG member's judgment is biased and can compromise or undermine the trust that stakeholders place in the TB REACH PSG. PSG members must complete a Declaration of Interest form at the commencement of a term.