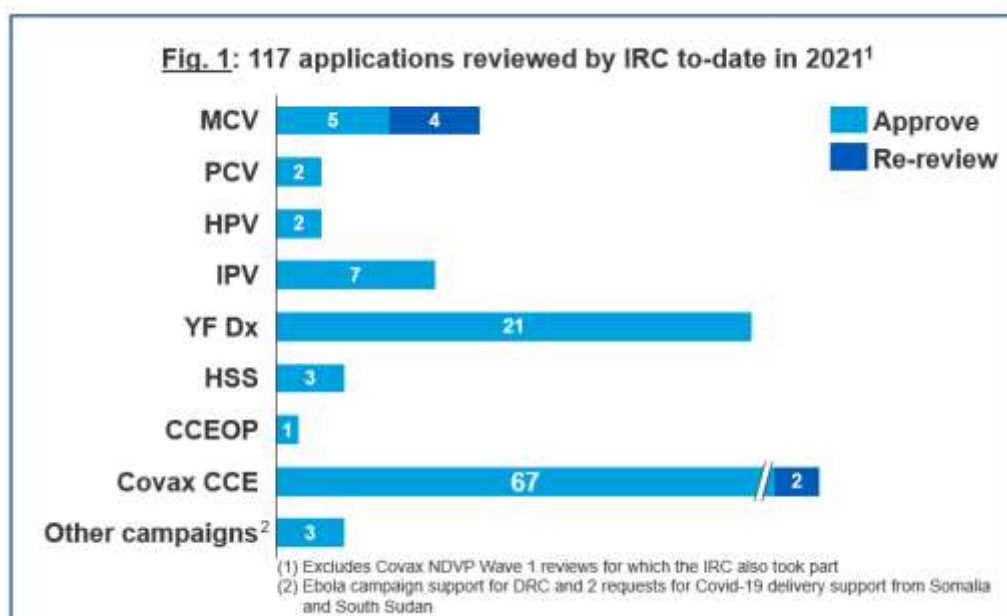


Annex C: IRC/HLRP Recommendations

Independent Review Committee (IRC)

The Independent Review Committee has had a significant uptick in activity in 2021, largely driven by its engagement to support the roll-out of COVID-19 vaccines. To-date, the IRC has been involved in the review of 117 applications, composed of 46 for core Gavi business and 71¹ Covax-related requests, largely for additional cold chain equipment to roll-out COVID-19 vaccines supplied via the COVAX Facility² (see Figure 1 below for the distribution of request types). The value of the requests received³ is over US\$ 140 million⁴, with US\$ 100 million recommended for funding (see Figure 2 below for value by support type). Support for MCV introductions and campaigns continues to drive vaccine requests, with 9 requests⁵ for support reviewed to-date worth an estimated value of ~US\$ 60 million. Gavi-supported countries further their efforts to prepare for withdrawal of OPV through the introduction and scale-up of IPV, with 7 requests for support of IPV second dose reviewed to-date and an additional 4 anticipated through the end of the year.



DPRK, Kyrgyzstan and Syria were able to complete their full portfolio planning process during the first half of 2021, resulting in requests totalling US\$ 19 million for HSS and CCEOP support, all recommended for funding by the IRC. DPRK was the largest of the three requests at US\$ 8.75 million with investments focused on tracking un-immunised children, achieving >97% coverage of Pentavalent 3 vaccines in under-performing provinces and improving and sustaining immunisation coverage in disaster-prone areas. The application from Syria also had a strong emphasis on coverage and equity, with 62% of the US\$ 6.8 million budget targeted to strengthening

¹ Includes 69 CCE requests and 2 requests for Covid-19 campaign support.

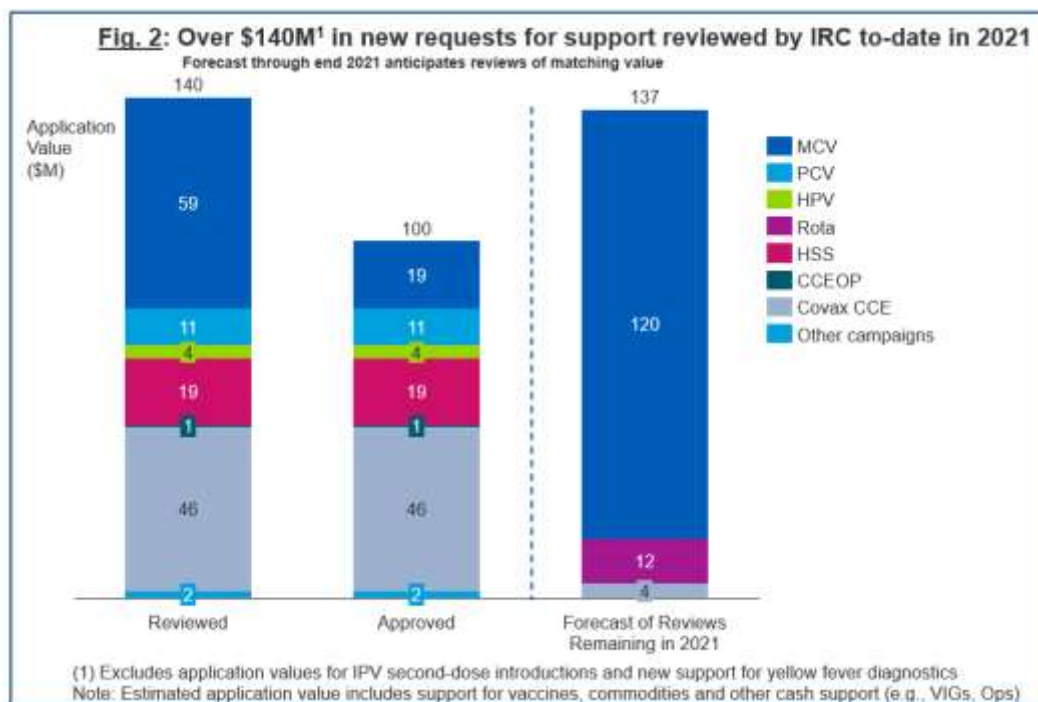
² The IRC also participated in country readiness assessments for roll-out of Covid-19 vaccines led by the WHO.

³ Estimated application value includes support for vaccines, commodities, and cash support (e.g., VIGs, Ops).

⁴ Excludes application values for IPV second-dose introductions and new support for yellow fever diagnostics.

⁵ Including 3 MCV introductions and 6 campaign requests.

immunisation service with a focus on low-performing districts and special population groups.



The IRC identified several best practices in country applications:

- Eritrea's HPV application included plans to conduct formative research with nomadic populations by embedding researchers to strengthen immunisation access;
- Madagascar's request for additional measles doses for its planned campaign included segmented data on high-risk populations and presented specific strategies to address them;
- Niger is piloting an electronic immunisation register and has updated its national vaccination policy to remove the age limit for measles second dose;
- Somalia's MCV follow-up campaign request included geo-mapping of nomadic migration to plan strategies targeting high-risk populations.

The IRC continued to highlight areas for strengthening country applications, including:

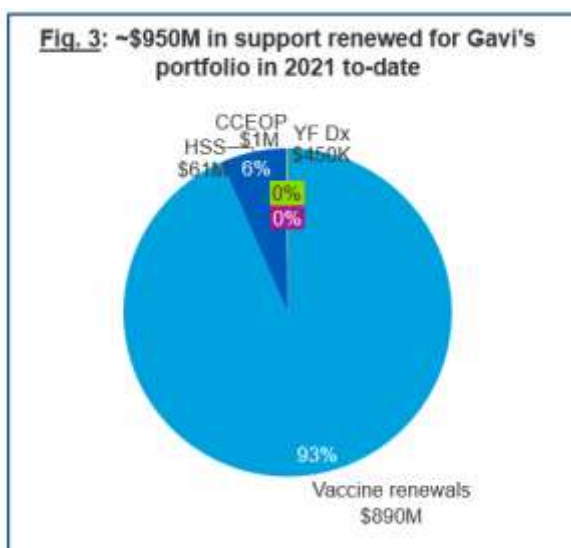
- Improving delivery strategies for zero-dose children, in particular urban high-risk populations, ensuring all requests for new vaccine introductions include a detailed analysis of zero-dose children with specific activities aimed to target them for vaccination;
- Leveraging SIAs to integrate other primary healthcare interventions (e.g., vitamin A supplements, deworming, health communication);
- Ensuring sufficient attention and budget are given to intra-campaign monitoring, including using the period as an opportunity to identify zero-dose children and under-vaccinated children and refer them for follow-up;
- Making robust use of all available data, especially local or subnational data, to harmonise denominators and address data discrepancies and to better identify and reach disadvantaged populations;

- Ensuring alignment of budgets with program plans and including robust programmatic justification for key cost drivers (e.g., size and quantity of vaccination teams in campaign planning) to demonstrate value for money of proposed approach.

For those who wish to read more, IRC reports can be found at the following links for [March 2021](#) and [July 2021](#).

High-Level Review Panel (HLRP)

Gavi's High-Level Review Panel has had two virtual meetings since the start of 2021, with the bulk of its focus on vaccine renewals. To-date the HLRP has recommended US\$ 950 million in renewal support, of which US\$ 890 million was for vaccine support to Gavi's core portfolio, US\$ 61 million was for continuation of health systems strengthening grants, US\$ 1 million for cold-chain equipment and optimisation and US\$ 450K for renewal of yellow-fever diagnostic support in 21 countries Gavi supports under the EYE Strategy (see Figure 3).



During its detailed reviews of vaccine dose renewals for 2022, the HLRP highlighted the progress made in integrating country level data and operational information to support decision making on vaccine dose renewals while continuing to stress the importance of effective vaccine management as an area for continued improvement by the entire Alliance partnership. The HLRP noted positively that stock reporting and monitoring using UNICEF's Thrive 360 tool has increased since the beginning of the year, with over 50 countries now regularly reporting through the tool. Further efforts to strengthen the quality, timeliness, access

to and use of the data are encouraged going forward. HLRP members also commented on the use of the WHO's wastage calculator, which in the example of Nigeria significantly decreased reliance on ad-hoc wastage studies and now serves as a good benchmark to triangulate information from other sources. This is notable in a country of Nigeria's size where small changes in coverage, buffer and wastage levels have a significant impact on forecasted dose requirements. Finally, the HLRP emphasized that the Gavi Secretariat will now work more systematically on performance metrics for different country segments⁶, making it easier to identify specific benchmarks for each of the segments, and flag to the HLRP areas of concern for follow-up.

The HLRP is in the process of resetting its TORs to align with the roll-out of Gavi's 5.0 strategy, with its first meeting under the revised approach anticipated in Q4 2021.

⁶ In the 5.0 strategic period, Gavi eligible countries are differentiated into four macro-categories: High-impact, Fragile, Priority and Core countries.