

Annex A: Proposed updates to targets for 2016-2020 Strategic Indicators as recommended by the PPC

Update on proposed targets for 2016-2020 Strategic Indicators: S2.1 (effective vaccine management), S2.5 (civil society engagement) and S3.4 (institutional capacity)

- In June 2018, the Gavi Alliance Board:
 - a) Approved the changes to the definitions and targets of the Strategy Indicators as set out in Annex A to Doc 02h; and
 - b) Requested the Secretariat to also continue tracking the original definitions and targets of these Strategic Indicators for monitoring purposes.¹
- In June 2018, targets for strategic indicators S2.1 (effective vaccine management) and S3.4 (institutional capacity) were still under development by the respective technical working groups.
- In addition, in June 2018, the Board recommended that the Secretariat establish a target for strategic indicator S2.5 (civil society engagement).

The proposed targets for these three strategic indicators have been reviewed by the PPC in October 2018, and are being presented to the Board for approval at their meeting in November 2018.

This annex presents a summary of considerations that informed target-setting for the three indicators (Section 1), as well as the full indicator definitions, with the proposed 2020 targets (Section 2).

¹ Decision 8 of the Gavi Alliance Consent Agenda, June 2018.

Section 1: Summary of considerations that informed target-setting

S2.1 – Effective vaccine management: The proposed 2020 target for the average of the country composite score of the last completed Effective Vaccine Management (EVM) assessment is 72%. The target represents an increase from the 2015 baseline (67%). The 2020 target was computed by creating country-level projections to 2020 based on their historical EVM values and then averaging them, as follows:

- For countries in which the composite score increased between the last two EVM assessments: the projected 2020 value was calculated based on the observed annualised rate of increase.
- For countries that have had only one previous EVM assessment: the composite score from that assessment was held constant and carried forward to 2020.
- For countries in which the composite score decreased between the last two EVM assessments: the composite score on the most recent assessment is held constant and carried forward to 2020.

Note that countries will only undergo one EVM assessment in the 2016-2020 strategy period. This is due to the change in frequency of EVM assessments from once every 3 years to once every 3 to 5 years. This target assumes that Gavi and the Alliance's increased focus and investment in supply chain management will enable countries to achieve improved composite scores in future EVM assessments or, at a minimum, maintain levels of performance as of last EVM assessment.

The proposed target, methodology and assumptions reflect consensus of members of the Immunisation Supply Chain Strategy Tracking Sub-Committee.

S2.5 – Civil society engagement: The proposed 2020 target for the percentage of Gavi-supported countries meeting benchmarks for civil society engagement in national immunisation programmes to improve coverage and equity is 63%. There was insufficient data to establish a baseline in 2015.

Methods used to establish the 2020 target include: 1) Gavi senior country managers (SCM) and health systems strengthening (HSS) focal points conducted a country-by-country review of the state of engagement between host-country and civil society; 2) SCM and HSS focal points predicted future levels of CSO engagement based on qualitative knowledge of country context, country multi-year plans and Gavi investments through health systems strengthening grants; 3) The final target was calculated based on the proportion of Gavi-supported countries that are predicted to meet the minimum benchmarks, as defined by the indicator definition.

This target represents 43 of the 68 Gavi-supported countries in the period to 2020 meeting all three criteria for civil society engagement. Achievement of this 2020 target would require that 43, out of the 46 countries that will undergo a PCA by 2020, meet all three criteria for civil society engagement.

Key methods and assumptions include:

- Host-country and civil society engagement in national immunisation programmes is assessed based on three criteria, as defined in the indicator

definition: 1) CSOs appear in national plans with clearly stated activities and plans that support improved coverage and equity; 2) CSOs appear with clear budgetary allocations for defined activities and plans (or justification given in national plans why not indicated); and 3) evidence is documented that CSO activities planned for improving coverage and equity have been completed and/or are being implemented according to stated plans.

- The predictions of each country's level of engagement in 2020 is based on a qualitative assessment of the extent to which this engagement will meet the defined criteria.

The proposed target, methodology and assumptions were reviewed by the Secretariat of the CSO constituency and its members.

S3.4 – Institutional capacity: The proposed 2020 target for the average of country composite scores for national decision making, programme management and monitoring across Gavi68 countries is 2.7 out of 4.0.² The target represents an increase from the 2017 baseline (2.4 out of 4.0).

Methods used to establish the 2020 target include: 1) SCMs conducted a country-by-country qualitative assessment of institutional capacity using a tool adapted from the PCA questionnaire and WHO guidance; 2) the Secretariat mapped investments in institutional capacity funded through LMC support and HSS grants; 3) projected composite scores for 2020 were established for each country based on the triangulation of baseline score, Alliance investments and best estimate of progress; 4) these projected composite scores were averaged across Gavi68 countries to obtain the 2020 target. Key methods and assumptions include:

- 18 mostly fragile countries that achieved a baseline score <1 to improve by an average of 0.2 (each country significantly improves³ by one level within 5-6 of 21 criteria assessed)
- 32 countries that achieved a baseline score of >2 and <3 to improve by 0.4 (each country significantly improves by one level within 10-12 of 21 criteria assessed)
- 18 countries that achieved a baseline score of >3 to maintain or slightly improve the score.
- Reporting on this indicator will be based on an annual assessment coordinated by the SCM. The SCM assessment tool includes 21 questions assessing different elements of EPI management capacity, Inter-agency coordination and NITAG functionality. The 21 questions were adapted from the PCA and WHO tools.
- Results from PCAs will be used to validate findings from the annual SCM assessment in the subset of Gavi68 countries that will undergo a PCA.

The proposed target, methodology and assumptions reflect consensus of members of the LMC working group.

² Results for this indicator are reported on a Likert-type scale ranging from 1.0 (least performing) to 4.0 (best performing).

³ Significant improvement is defined as improvement from one level in the rating scale to another (i.e. from 1 to 2; 2 to 3; 3 to 4)

Section 2: Details of the relevant 2016-2020 strategy indicators and proposed 2020 targets

| S2.1 Effective vaccine management | |
|--|---|
| Definition | Average of country composite score on last completed Effective Vaccine Management (EVM) assessment |
| Data Source | WHO/UNICEF through EVM Global Analysis based on EVM Assessment database |
| Numerator | Sum of most recent EVM composite score for each Gavi68 country |
| Denominator | Number of Gavi68 countries with at least one EVM assessment |
| Level of disaggregation | By fragile status and transition status; breakdown of values by subcomponents |
| Reporting schedule | Annual |
| Rationale for use | This indicator assesses progress over time in effective vaccine management, which reflects the objectives of the Gavi supply chain strategy to increase availability, quality and efficiency of vaccine supply chain systems. |
| Method of measurement | The indicator will measure the average of the composite scores across Gavi68 countries that have undergone an EVM assessment since 2011: 1) the most recent composite score from EVM assessments for each country is obtained; 2) the values across countries are summed; 3) an unweighted average of values produced in step 1 is calculated by dividing the value produced in step 2 by the number of Gavi countries with at least one EVM assessment. |
| Strengths and limitations | <p>Strengths: Calculating the average of EVM composite scores will enable improved trend monitoring and assessment of the collective strength of supply chains across Gavi68 countries. Secondary analysis will enable assessment of the distribution of countries relative to the benchmark for EVM composite score of 80%.</p> <p>Limitations: Indicator reporting still based on composite score potentially masking achievement across individual components of EVM which comprise the composite score.</p> |
| Results (baseline, actuals and target) | <p>(As reported to the Board in June 2018, with the 2020 target updated):</p> <p>2015: 67% 2016: 67% 2017: 68% 2020: 72%</p> <p>Rationale for target-setting: The 2020 target is based on a linear forecast of EVM scores for each individual country and then aggregated for all Gavi68 countries.</p> |

| S2.5 Civil society engagement | |
|--|---|
| Definition | Percentage of Gavi-supported countries meeting benchmarks for civil society engagement in national immunisation programmes to improve coverage and equity |
| Data Source | Programme Capacity Assessments |
| Numerator | Number of Gavi-supported countries having had a Programme Capacity Assessment in the last five years, with validated results meeting each of three engagement criteria |
| Denominator | Number of Gavi-supported countries having had a Programme Capacity Assessment including CSO questionnaire in the last five years Gavi68 countries |
| Level of disaggregation | By fragile state status and transition status, and by each of the three criteria comprising the indicator |
| Reporting schedule | Updated once annually, with updates to PPC and Board if new data available |
| Rationale for use | This indicator is a measure of the engagement of civil society organisations for improved coverage and equity, in line with Objective C under the Alliance's second strategic goal: 'strengthen engagement of civil society, private sector and other partners in immunisation'. |
| Method of measurement | <p>This indicator is measured as the percentage of countries meeting each of the following three criteria for civil society engagement for improved coverage and equity: 1) civil society organisations (CSOs) appear in national plans with clearly stated activities and plans that support improved coverage and equity; 2) CSOs appear with clear budgetary allocations for defined activities and plans (or justification given in national plans why not indicated); and 3) evidence is documented that CSO activities planned for improving coverage and equity have been completed and/or are being implemented according to stated plans.</p> <p>Countries that have not had a PCA assessment with CSO questionnaire in the past five years, or that are determined by the PCA to lack sufficient capacity to engage civil society in immunisation, will be excluded from the numerator and denominator.</p> |
| Strengths and limitations | <p>Strengths: The strength of this indicator is that it measures in a direct way the engagement of civil society in support of improved coverage and equity, in line with Gavi's strategy. In contrast to other civil society engagement indicators explored, this indicator has the advantage of including direct verification of whether CSO activities planned for improving coverage and equity have been completed, and/or are being implemented according to plan.</p> <p>Limitations: The primary limitation is that this indicator does not provide information about outcomes associated with civil society engagement in immunisation. Additional assessment and engagement would be needed to understand to what extent and in what ways civil society actors are contributing to different outcomes of interest.</p> <p>The indicator is time-lagged; PCAs are conducted once every three years in a different subset of Gavi-supported countries each year, meaning that up to three years will be needed to develop an understanding of CSO engagement across all Gavi-supported countries.</p> |
| Results (baseline, actuals and target) | <p>(As reported to the Board in June 2018, with the 2020 target updated):</p> <p>2015: N/A 2016: 40% 6% (4 of 68 countries) 2017: 57%18% (12 of 68 countries) 2020: 63% (43 of 68 countries)</p> <p>Rationale for target-setting: The 2020 target is based on qualitative assessment of current and future levels of engagement between host-country and CSOs.</p> |

| S3.4 Institutional capacity | |
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| Definition | Average of country composite score for national decision making, programme management and monitoring |
| Data Source | Gavi institutional capacity assessment tool |
| Numerator | Sum of institutional capacity composite scores for each Gavi68 country |
| Denominator | Gavi68 countries |
| Level of disaggregation | By fragile state status and transition status; breakdown of values by subcomponents (i.e. EPI management capacity, functionality of Inter-agency coordinating mechanisms and functionality of National Immunisation Technical Advisory Group) |
| Reporting schedule | Annual |
| Rationale for use | <p>The indicator tracks progress across three areas defined as the key fields of engagement under the Leadership, Management and Coordination Strategic Focus Area: EPI management capacity, functionality of Inter-agency coordinating mechanisms and functionality of National Immunisation Technical Advisory Group.</p> <p>Strengthened institutional capacity for national decision making, programme management and monitoring is on the critical pathway to programmatic and financial sustainability, and is a strategic enabler of Gavi's overall 2016-2020 strategy.</p> |
| Method of measurement | <p>Data will be collected based on the Senior Country Manager's annual assessment of the following areas of a country's institutional capacity: 1) EPI management capacity, 2) ICC functionality and 3) NITAG functionality.</p> <p>The assessment will be conducted annually and will be based on a custom tool developed by a working group under the Leadership, Management and Coordination Strategic Focus Area.</p> |
| Strengths and limitations | <p>Strengths: Revised data collection methodology will produce new data for Gavi-eligible countries annually and enable timely assessment of progress in institutional capacity.</p> <p>Limitations: Responses will be collected through the Gavi institutional capacity assessment tool which may be subjective and potentially biased. Mitigation measures taken include consultation and endorsement of the questionnaire by Alliance partners; and calibration with findings from Programme Capacity Assessments, which are conducted every three years.</p> |
| Results (baseline, actuals and target) | <p>(As reported to the Board in June 2018, with the 2020 target updated):</p> <p>2015: N/A 2016: N/A 2017: 2.4 2020: 2.7</p> <p>Rationale for target-setting: The 2020 target is based on the triangulation of baseline score, alliance investments and best estimate of progress in institutional capacity in the 68 Gavi-supported countries.</p> |