

**Application Form for Country Proposals**

*Providing support for IPV Introduction*

Submitted by

The Government of Haiti

Date of Submission 25 January 2015

This form is applicable to applications submitted in 2014

Document date: February 2014

This document replaces all previous versions and incorporates revisions to the cover page only.

The completed application documents must be submitted electronically to the GAVI Secretariat at [proposals@gavialliance.org](mailto:proposals@gavialliance.org) by the application deadline.

Enquiries to: [proposals@gavialliance.org](mailto:proposals@gavialliance.org?subject=Applications%20for%20New%20Vaccines%20Support) or representatives of a GAVI partner agency. The documents can be shared with GAVI partners, collaborators and general public. The application and attachments must be submitted in English, French, Spanish, or Russian.

Note: Please ensure that the application has been received by the GAVI Secretariat on or before the day of the deadline.

The GAVI Secretariat is unable to return submitted documents and attachments to countries. Unless otherwise specified, documents will be shared with the GAVI Alliance partners and the general public.

**Gavi Application specification**

A list of required attachments is included at the end of this form.

#### Summary

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| The Government of: Haiti | | | | Date of Submission 25 January 2015 | | |
| IPV introduction date (month/year): July 2015 | | | | Current DTP schedule: DTP1 with IPV (6 weeks), DTP2 with OPV1 (10 weeks), DTP3 with OPV2 (14 weeks) and MR with OPV3 (9 months) | | |
| Co-financing (yes/no) No | | | | In the event of co-funding, please specify the amount (USD) per dose: N/A | | |
| Procurement mean (UNICEF-SD, PAHO/WHO, self-procurement): WHO/PAHO | | | | | | |
|  | | | |  | | |
| Vaccine preferences (in order, from 1 to 3): | | | Reason for choice of presentation | | | Expected vaccine wastage rate\*: |
| IPV 5 doses/vial | | | Smaller volume than the 1-dose presentation | | | 25% |
| IPV 1 dose/vial | | | Smaller volume than previous presentation | | | 5% |
| IPV 10 doses/vial | | | Requires less space that the 2 other previous presentations but not provided by PAHO/WHO | | | 50% |
|  | | |  | | | *\* Cannot exceed 50% for 10-dose vials, 30% for 5-dose vials, 10% for 2-dose vials, or 5% for 1-dose vials* |
|  | |  | |  |  | |
| Year | Target population for the IPV [[1]](#footnote-1) | | | Number in birth cohort | Number of surviving infants | |
| 2014 |  | | |  |  | |
| 2015 | 154 458 | | | 172 303 | 154 458 | |
| 2016 | 316 639 | | | 353 222 | 316 639 | |
| 2017 | 324 555 | | | 362 053 | 324 555 | |
| 2018 | 332 669 | | | 371 105 | 332 669 | |
| Total | 1 128 321 | | | 1 258 683 | 1 128 321 | |

**IPV introduction plan**

**Using the instructions presented in Annex A and the WHO model plan for the introduction of new vaccines, please submit the detailed plan for the introduction of the IPV as Attachment No. 1 to this request**

**Timeline**

Using the Excel template provided in Annex C, please complete a detailed timeline for all activities related to the IPV Introduction Plan. The completed Annex C should be attached to this application as Attachment 2.

**Budget and financing**

Using the Excel template provided in Annex D, please complete the budget template in Table E1 detailing expected expenses and funding sources. An example worksheet (Table E2) is provided to assist with estimating detailed costs for items related to vaccine introduction. The completed Annex D should be attached to this application as Attachment 3.

**Fiduciary management arrangement data**

Please indicate whether the one-time vaccine introduction grant for IPV should be transferred to the government or to WHO or UNICEF. Please attach a bank transfer request form if the funds are to be transferred to the government. Please note that WHO and/or UNICEF will require administrative fees of approximately 7% which would need to be covered by the operational funds.

|  |
| --- |
| WHO/PAHO |

If the allocation for the introduction of the IPV is to be transferred to the government, the countries that have completed their Financial Management Assessment (FMA) must confirm whether the financial management procedures - including the bank account information - on which the country and GAVI have agreed are still applicable. If not, the country must provide detailed information on any changes planned concerning the existing arrangements in terms of financial management.

Countries that are not a party to a memorandum signed following an assessment of their financial management system but would like the allocation for the introduction of the IPV to be transferred to the Government must provide, as Attachment 4, a description of the funding mechanism proposed to manage the allocation, in accordance with the following process:

1. Planning, budget and coordination
2. Budget execution arrangements including internal controls
3. Procurement arrangements
4. Accounting and financial oversight
5. External audit arrangements
6. Internal audit oversight

**Signatures**

#### Government

The Government of Haiti acknowledges that this new vaccine introduction is intended to contribute to the eradication of polio as reflected the Global Polio Eradication Initiative’s Polio Eradication and Endgame Strategic Plan. (<http://www.polioeradication.org/resourcelibrary/strategyandwork.aspx#strategyandwork.aspx?s=2&_suid=1382372983385049930892531473775>).

The Government of Haiti requests support from GAVI for the use of inactivated polio vaccine (IPV).

The Government of Haiti commits itself to improving immunisation services on a sustainable basis. The Government requests that the GAVI Alliance and its partners contribute financial and technical assistance to support immunisation of the targeted population with one dose of IPV as outlined in this application.

Annex D attached shows the amount of support requested from the GAVI Alliance as well as the Government of Haiti’s and partner’s financial commitment for the introduction of IPV.

Please note that this application will not be reviewed by GAVI’s Independent Review Committee (IRC) without the signature of the Minister of Health, Minister of Finance, and the ICC membership, or their delegated authority.

Please provide appropriate signatures below.

Enter the family name in capital letters.

|  |  |
| --- | --- |
| **Minister of Health**  **(or delegated authority)** | |
| **Name** | Dr. Florence Duperval Guillaume |
| **Date** |  |
| **Signature** |  |

|  |  |
| --- | --- |
| **Minister of Finance**  **(or delegated authority)** | |
| **Name** |  |
| **Date** |  |
| **Signature** |  |

This application has been compiled by:

Enter the family name in capital letters.

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** | **Position** | **Telephone** | **Email** |
| Dr. Jeannot FRANCOIS | EPI Director | (+509)3649692 | francoisjeannot@yahoo.fr |
| Dr. Faye Papa COUMBA | EPI/WHO Focal Point | (+509)37885579 | fayecp@paho.org |
| Dr. Lydie MAOUNGOU | Immunisation / UNICEF Focal Point | (+509)48903719 | lmminguiel@unicef.org |
| Dr. Roopal PATEL | Surveillance Focal Point | (+509)31703487 | dvn5@cdc.gov |

#### National Coordinating Body – Inter Agency-Coordinating Committee (ICC) for Immunisation or equivalent

We the members of the ICC, HSCC, or equivalent committee confirm that a quorum of the committee met on [Type text] to review this proposal. By the terms of reference for our committee, we endorsed this proposal at that meeting, based on the supporting documentation attached.

The endorsed minutes of this meeting are attached as Attachment 5.

Enter the family name in capital letters.

|  |  |  |
| --- | --- | --- |
| **Name/Title** | **Agency/Organisation** | **Signature** |
| Dr. Jean Luc PONCELET | WHO/PAHO |  |
| **Mr. Marc VINCENT** | UNICEF |  |
| **Dr. David LOWRANCE** | CDC |  |

In case the GAVI Secretariat has queries on this submission, please contact:

Enter the family name in capital letters.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | Dr. Jeannot FRANCOIS | **Position** | EPI / Haiti Director |
| **Tel no.** | (+509)3649692 |
| **Fax no.** | Not applicable | **Address** | Directorate for the Expanded Programme on Immunisation |
| **Email** | francoisjeannot@yahoo.fr |

**Attachments required**

* Attachment 1. IPV Introduction Plan developed using the WHO NVPI model (see Annex A)
* Attachment 2. Detailed timeline for key activities of the IPV introduction plan (see Annex C)
* Attachment 3. Completed budget and financing Tables E1 and E2 (Annex D)
* Attachment 4. Fiduciary management arrangement data (only applies for countries without an existing signed Aide Memoire derived from an FMA but who would like the IPV introduction grant transferred to the Government).
* Attachment 5. Minutes of ICC meeting endorsing the IPV introduction plan
* Attachment 6. A copy of the most recent comprehensive multi-year plan (cMYP). The cMYP does not need to include IPV; however, countries should specify a plan for inclusion of IPV into their next cMYP, including date for revision.
* Attachment 7. A progress report on the implementation of the improvement plan from an EVM conducted within the preceding 36 months. If no EVM has been conducted or if the current EVM was conducted more than 3 years ago, GAVI requires countries to provide a description of the vaccine management system in place and commit to conduct an EVM within six months of the application being approved.
* Attachment 8. GAVI generally procures and delivers vaccines and supplies through UNICEF or the PAHO Revolving Fund. If an alternative mechanism is requested, or the vaccine will be self-procured by the country itself, please document the requirements as listed in Section 2.3 of the Guidelines.

**GAVI ALLIANCE GRANT TERMS AND CONDITIONS**

Countries will be expected to sign and agree to the following GAVI Alliance terms and conditions in the application forms. These terms and conditions may also be included in a grant agreement to be entered into between GAVI and the country.

***FUNDING USED SOLELY FOR APPROVED PROGRAMMES***

The applicant country ("Country") confirms that all funding provided by the GAVI Alliance for this application will be used and applied for the sole purpose of fulfilling the programme(s) described in this application. Any significant change from the approved programme(s) must be reviewed and approved in advance by the GAVI Alliance. All funding decisions for this application are made at the discretion of the GAVI Alliance Board and are subject to IRC processes and the availability of funds.

***AMENDMENT TO THIS PROPOSAL***

The Country will notify the GAVI Alliance in its Annual Progress Report or equivalent if it wishes to propose any change to the programme(s) description in this application. The GAVI Alliance will document any change approved by the GAVI Alliance, and this application will be amended.

***RETURN OF FUNDS***

The Country agrees to reimburse to the GAVI Alliance, all funding amounts that are not used for the programme(s) described in this application. The Country's reimbursement must be in US dollars and be provided, unless otherwise decided by the GAVI Alliance, within sixty (60) days after the Country receives the GAVI Alliance's request for a reimbursement. Any funds reimbursed must be deposited into the account or accounts designated by the GAVI Alliance.

***SUSPENSION/ TERMINATION***

The GAVI Alliance may suspend all or part of its funding to the Country if it has reason to suspect that GAVI support and/or funds have been used for purpose other than for the programmes described in this application, or any GAVI Alliance-approved amendment to this application. The GAVI Alliance retains the right to terminate its support to the Country for the programmes described in this application if a misuse of GAVI Alliance funds is confirmed.

***ANTICORRUPTION***

The Country confirms that funds provided by the GAVI Alliance shall not be offered by the Country to any third person, nor will the Country seek in connection with this application any gift, payment or benefit directly or indirectly that could be construed as an illegal or corrupt practice.

***AUDITS AND RECORDS***

The Country will conduct annual financial audits, and share these with the GAVI Alliance, as requested. The GAVI Alliance reserves the right, on its own or through an agent, to perform audits or other financial management assessment to ensure the accountability of funds disbursed to the Country.

The Country will maintain accurate accounting records documenting how GAVI Alliance funds are used. The Country will maintain its accounting records in accordance with its government-approved accounting standards for at least three years after the date of last disbursement of GAVI Alliance funds. If there is any claims of misuse of funds, Country will maintain such records until the audit findings are final. The Country agrees not to assert any documentary privilege against the GAVI Alliance in connection with any audit.

***CONFIRMATION OF LEGAL VALIDITY***

The Country and the signatories for the government confirm that this application is accurate and correct and forms a legally binding obligation on the Country, under the Country’s law, to perform the programmes described in this application.

***CONFIRMATION OF COMPLIANCE WITH THE GAVI ALLIANCE TRANSPARENCY AND ACCOUNTABILITY POLICY***

The Country confirms that it is familiar with the GAVI Alliance Transparency and Accountability Policy (TAP) and will comply with its requirements.

***ARBITRATION***

Any dispute between the Country and the GAVI Alliance arising out of or relating to this application that is not settled amicably within a reasonable period of time, will be submitted to arbitration at the request of either the GAVI Alliance or the Country. The arbitration will be conducted in accordance with the then-current UNCITRAL Arbitration Rules. The parties agree to be bound by the arbitration award, as the final adjudication of any such dispute. The place of arbitration will be Geneva, Switzerland. The language of the arbitration will be English.

For any dispute for which the amount at issue is US$ 100,000 or less, there will be one arbitrator appointed by the GAVI Alliance. For any dispute for which the amount at issue is greater than US $100,000 there will be three arbitrators appointed as follows: The GAVI Alliance and the Country will each appoint one arbitrator, and the two arbitrators so appointed will jointly appoint a third arbitrator who shall be the chairperson.

The GAVI Alliance will not be liable to the country for any claim or loss relating to the programmes described in this application, including without limitation, any financial loss, reliance claims, any harm to property, or personal injury or death. Country is solely responsible for all aspects of managing and implementing the programmes described in its application.

***USE OF COMMERCIAL BANK ACCOUNTS***

The eligible country government is responsible for undertaking the necessary due diligence on all commercial banks used to manage GAVI cash-based support, including HSS, ISS, CSO and vaccine introduction grants. The undersigned representative of the government confirms that the government will take all responsibility for replenishing GAVI cash support lost due to bank insolvency, fraud or any other unforeseen event.

1. If there are differences between the national estimates of coverage and those of UNICEF-WHO, the Secretariat shall refer to the latter to set these targets. [↑](#footnote-ref-1)