GAVI
THE GLOBAL ALLIANCE FOR VACCINES & IMMUNIZATION
Partnering with The Vaccine Fund

Updated February 2004

Progress Report

to the
Global Alliance for Vaccines and Immunization (GAVI)
and
The Vaccine Fund

by the Government of

COUNTRY: **Malawi**

Date of submission: *25th May, 2004*

Reporting period: *2nd Sept, 03 to 25th May, 2004*
refer to the previous calendar year)

(Tick only one) :

Inception report	ρ
First annual progress report	ρ
Second annual progress report	ρ
Third annual progress report	√
Fourth annual progress report	ρ
Fifth annual progress report	ρ

Text boxes supplied in this report are meant only to be used as guides. Please feel free to add text beyond the space provided.
**Unless otherwise specified, documents may be shared with the GAVI partners and collaborators*

Progress Report Form: Table of Contents

1. Report on progress made during the previous calendar year

To be filled in by the country for each type of support received from GAVI/The Vaccine Fund.

1.1 Immunization Services Support (ISS)

1.1.1 Management of ISS Funds

Please describe the mechanism for management of ISS funds, including the role of the Inter-Agency Co-ordinating Committee (ICC).
Please report on any problems that have been encountered involving the use of those funds, such as delay in availability for programme use.

Malawi did not qualify for the ISS funds

1.1.2 Use of Immunization Services Support

In the past year, the following major areas of activities have been funded with the GAVI/Vaccine Fund contribution.

Funds received during the reporting year *N/A*
Remaining funds (carry over) from the previous year _____

Table 1 : Use of funds during reported calendar year 2003-2004

Area of Immunization Services Support	Total amount in US $	Amount of funds			
		PUBLIC SECTOR			PRIVATE SECTOR & Other
		Central	Region/State/Province	District	
Vaccines	UNICEF				
Injection supplies	UNICEF				
Personnel					
Transportation					
Maintenance and overheads					
Training					
IEC / social mobilization					

Outreach					
Supervision					
Monitoring and evaluation					
Epidemiological surveillance					
Vehicles					
Cold chain equipment					
Other ……. *(specify)*					
Total:					
Remaining funds for next year:					

If no information is available because of block grants, please indicate under 'other'.

***Please attach the minutes of the ICC meeting(s) when the allocation of funds was discussed**.*

Please report on major activities conducted to strengthen immunization, as well as, problems encountered in relation to your multi-year plan.

N/A

1.1.3 Immunization Data Quality Audit (DQA) (*If it has been implemented in your country)*

Has a plan of action to improve the reporting system based on the recommendations from the DQA been prepared?
If yes, please attach the plan.

YES ☐ NO ☑

If yes, please attach the plan and report on the degree of its implementation.

Malawi did not qualify for window two support and therefore DQA was not conducted

Please attach the minutes of the ICC meeting where the plan of action for the DQA was discussed and endorsed by the ICC.

Please report on studies conducted regarding EPI issues during the last year (for example, coverage surveys).

Malawi conducted a comprehensive EPI survey in October, 2003.

1.2 GAVI/Vaccine Fund New & Under-used Vaccines Support

1.2.1 Receipt of new and under-used vaccines during the previous calendar year

Start of vaccinations with the new and under-used vaccine: MONTH:*January* YEAR: *2002*

Please report on receipt of vaccines provided by GAVI/VF, including problems encountered.

A total of 728,000 vials of DPT-HepB+Hib were received between October2003 and February, 2004. The vaccines were received in good condition as has been the case for the past years. There was good communication about the arrival of vaccines. The following are the details of vaccine arrivals and receipts. ***15/10/03: 256,400 vials of 2 doses*** ***19/12/03: 51,500 vials of 2 doses*** ***19/02/03: 420,100 vials of 2 doses***

1.2.2 Major activities

Please outline major activities that have been or will be undertaken, in relation to, introduction, phasing-in, service strengthening, etc. and report on problems encountered.

- ***Supportive supervisory visits to districts.***
- ***District based surveillance meetings conducted in all districts.***
- ***Follow-up of health workers at health centre level by District Health Management Teams on experiences after introduction of new vaccine.***
- ***Disease surveillance Focal point persons meetings.***
- ***Training on vaccine wastage study in 8 randomly selected districts and 80 health centres across the country.***

1.2.3 Use of GAVI/The Vaccine Fund financial support (US$100,000) for the introduction of the new vaccine

Please report on the proportion of 100,000 US$ used, activities undertaken, and problems encountered such as delay in availability of funds for programme use.

- ***US13,000.00 was disbursed to districts this year to enable them follow-up health facilities experiences regarding introduction of new vaccines.***

1.3 Injection Safety

1.3.1 Receipt of injection safety support

Please report on receipt of injection safety support provided by GAVI/VF, including problems encountered

- ***The safe injection proposal was submitted in May, 2002 and received a conditional approval. Some of the conditions included development of a Strategic Safe Injection and Waste Management Plan of Action. This has been done and the country will shortly re-submit its application.***

1.3.2 Progress of transition plan for safe injections and safe management of sharps waste.

Please report on the progress based on the indicators chosen by your country in the proposal for GAVI/VF support.

Indicators	Targets	Achievements	Constraints	Updated targets
Number of health facilities using AD syringes for routine immunization services.	***January, 2002***	***All health facilities introduced AD syringes by January, 2002 except for BCG. By January, 2003 all health facilities introduced BCG ADs***	***There was no formal training on ADs for BCG and some health workers experienced problems at the beginning,***	

1.3.3 Statement on use of GAVI/The Vaccine Fund injection safety support (if received in the form of a cash contribution)

The following major areas of activities have been funded (specify the amount) with the GAVI/The Vaccine Fund injection safety support in the past year:

N/A

2. Financial sustainability

Inception Report : Outline timetable and major steps taken towards improving financial sustainability and the development of a financial sustainability plan.

First Annual Progress Report : Submit completed financial sustainability plan by given deadline and describe assistance that will be needed for financial sustainability planning.

The country will re-submit its FSP plan by November, 2004.

Second Annual Progress Report : Describe indicators selected for monitoring financial sustainability plans and include baseline and current values for each indicator. In the following table 2, specify the annual proportion of five year of GAVI/VF support for new vaccines that is planned to be spread-out to ten years and co-funded with other sources.

Table 2 : Sources (planned) of financing of new vaccine ***Currently not applicable since the Plan has not yet been approved***

Proportion of vaccines supported by	**Annual proportion of vaccines**									
	20..	**20..**	**20..**	**20..**	**20..**	**20..**	**20..**	**20..**	**20..**	**20..**
Proportion funded by GAVI/VF (%)										
Proportion funded by the Government and other sources (%)										
Total funding for ……. *(new vaccine)* *										

** Percentage of DTP3 coverage (or measles coverage in case of Yellow Fever) that is target for vaccination with a new and under-used vaccine*

Subsequent reports: Summarize progress made against the financing strategy, actions and indicators section of the FSP; include successes, difficulties and responses to challenges encountered in achieving outlined strategies and actions. Report current values for indicators selected to

monitor progress towards financial sustainability. Include funds received to date versus those expected for last year and the current year and actions taken in response to any difficulties.
Update the estimates on program costs and financing with a focus on the last year, the current year and the next 3 years. For the last year and current year, update the estimates of expected funding provided in the FSP tables with actual funds received since. For the next 3 years, update any changes in the costing and financing projections. The updates should be reported using the same standardized tables and tools used for the development of the FSP (latest versions available on http://www.gaviftf.org under FSP guidelines and annexes. Highlight assistance needed from partners at local, regional and/or global level.

3. Request for new and under-used vaccines for year: 2005

*Section 3 is related to the request for new and under used vaccines and injection safety for the **forthcoming year**.*

3.1. Up-dated immunization targets

Confirm/update basic data approved with country application: figures are expected to be consistent with those reported in the WHO/UNICEF Joint Reporting Forms. Any changes and/or discrepancies **MUST** be justified in the space provided (page 12). Targets for future years **MUST** be provided.

Table 3 : Update of immunization achievements and annual targets

Number of	Achievements and targets								
	2000	**2001**	**2002**	**2003**	**2004**	**2005**	**2006**	**2007**	**2008**
DENOMINATORS									
Births	562210	576944	587903	599074	621445	633252	645284	657544	674536
Infants' deaths	58470	60002	61142	62304	64630	65858	67110	68385	70152
Surviving infants	509248	522594	532522	542637	562903	573798	584496	595601	610993
Infants vaccinated / to be vaccinated with **1st dose** of DTP (DTP1)*	498579	523363							
Infants vaccinated / to be vaccinated with **3rd dose** of DTP (DTP3)*	382587	469660							
NEW VACCINES **									
Infants vaccinated with **1st dose** of **DPT-HepB+Hib** *(new vaccine)*				547300					
Infants vaccinated with **3rd dose** of **DPT-HepB+Hib** *(new vaccine)*			386772	458403					
Wastage rate of **DPT-HepB+Hib***(new vaccine)*			16	**3**					
INJECTION SAFETY****									
Pregnant women vaccinated / to be vaccinated with TT	311373	407842	354573	521700					
Infants vaccinated / to be vaccinated with BCG	422863	533654	457607	543542					

Infants vaccinated / to be vaccinated with Measles	369707	430887	368294	415230					

* Indicate actual number of children vaccinated in past years and updated targets (with either DTP alone or combined)
** Use 3 rows for every new vaccine introduced
*** Indicate actual wastage rate obtained in past years
**** Insert any row as necessary

Note: 3% wastage may not be realistic as some health facilities were not recording number of vials either used or discarded during immunization sessions. Wastage by districts ranged from 1% to -10%

Please provide justification on changes to baseline, targets, wastage rate, vaccine presentation, etc. from the previously approved plan, and on reported figures which differ from those reported in the WHO/UNICEF Joint Reporting Form in the space provided below.

Current new vaccine requirements have taken into account the agreed wastage rate of 10% and use of birth cohort as opposed to surviving infants.

3.2 Confirmed/Revised request for new vaccine *(to be shared with UNICEF Supply Division)* **for the year 2005** *(indicate forthcoming year)*

Please indicate that UNICEF Supply Division has assured the availability of the new quantity of supply according to new changes.

Discussed with UNICEF country office.

Table 4: Estimated number of doses of …… vaccine *(specify for one presentation only)* : *(Please repeat this table for any other vaccine presentation requested from GAVI/The Vaccine Fund*

		Formula	For year 2005
A	Infants vaccinated / to be vaccinated with 1st dose of ……. *(new vaccine)*		633252
B	Percentage of vaccines requested from The Vaccine Fund taking into consideration the Financial Sustainability Plan	*%*	100
C	Number of doses per child		3
D	Number of doses	*A x B/100 x C*	1899756
E	Estimated wastage factor	*(see list in table 3)*	1.11
F	Number of doses (incl. wastage)	*A x C x E x B/100*	2108729
G	Vaccines buffer stock	*F x 0.25*	NA
H	Anticipated vaccines in stock at start of year ….		100,000
I	Total vaccine doses requested	*F + G - H*	2008729
J	Number of doses per vial		2
K	Number of AD syringes (+ 10% wastage)	*(D + G – H) x 1.11*	1997729
L	Reconstitution syringes (+ 10% wastage)	*I / J x 1.11*	1114845
M	Total of safety boxes (+ 10% of extra need)	*(K + L) / 100 x 1.11*	34550

Remarks

- **Phasing:** Please adjust estimates of target number of children to receive new vaccines, if a phased introduction is intended. If targets for hep B3 and Hib3 differ from DTP3, explanation of the difference should be provided
- **Wastage of vaccines:** Countries are expected to plan for a maximum of:
  50% wastage rate for a lyophilized vaccine in 10 or 20-dose vial;
  25% for a liquid vaccine in a 10 or 20-dose vial;
  10% for any vaccine (either liquid or lyophilized) in 1 or 2-dose vial.
- **Buffer stock:** The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero under other years. In case of a phased introduction with the buffer stock spread over several years, the formula should read: [F – number of doses (incl. wastage) received in previous year] * 0.25.
- **Anticipated vaccines in stock at start of year… ….:** It is calculated by deducting the buffer stock received in previous years from the current balance of vaccines in stock.
- **AD syringes:** A wastage factor of 1.11 is applied to the total number of vaccine doses requested from the Fund, excluding the wastage of vaccines.
- **Reconstitution syringes:** it applies only for lyophilized vaccines. Write zero for other vaccines.
- **Safety boxes:** A multiplying factor of 1.11 is applied to safety boxes to cater for areas where one box will be used for less than 100 syringes

Table 5: Wastage rates and factors

Vaccine wastage rate	5%	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%
Equivalent wastage factor	1.05	1.11	1.18	1.25	1.33	1.43	1.54	1.67	1.82	2.00	2.22	2.50

**Please report the same figure as in table 3.*

3.3 Confirmed/revised request for injection safety support for the year **2005** *(indicate forthcoming year)*

Table 5: Estimated supplies for safety of vaccination for the next two years with BCG
)

		Formula	For year 2005	For year 2006
A	**Target of children for BCG vaccination**[1]	#	633252	645284
B	**Number of doses per child**	#	1	1
C	**Number of BCG doses**	A x B	633252	645284
D	**AD syringes (+10% wastage)**	C x 1.11	702910	716266
E	**AD syringes buffer stock** [2]	D x 0.25	175728	
F	**Total AD syringes**	D + E	885638	716266
G	**Number of doses per vial**	#	20	20
H	**Vaccine wastage factor** [4]	*Either 2 or 1.6*	2	2
I	**Number of reconstitution** [3] **syringes (+10% wastage)**	*C x H x 1.11 / G*	70291	71627
J	**Number of safety boxes (+10% of extra need)**	*(F + I) x 1.11 / 100*	10611	8746

If quantity of current request differs from the GAVI letter of approval, please present the justification for that difference.

[1] GAVI will fund the procurement of AD syringes to deliver 2 doses of TT to pregnant women. If the immunization policy of the country includes all Women of Child Bearing Age (WCBA), GAVI/The Vaccine Fund will contribute to a maximum of 2 doses for Pregnant Women (estimated as total births).

[2] The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

[3] Only for lyophilized vaccines. Write zero for other vaccines

4 Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

Table 6: Estimated supplies for safety of vaccination for the next two years with Measles

		Formula	For year 2005	For year 2006
A	**Target of children for Measles vaccination**	#	633252	645284
B	**Number of doses per child**	#	1	1
C	**Number of Measles doses**	A x B	633252	645284
D	**AD syringes (+10% wastage)**	C x 1.11	702910	716266
E	**AD syringes buffer stock** [4]	D x 0.25	175728	
F	**Total AD syringes**	D + E	885638	716266
G	**Number of doses per vial**	#	10	10
H	**Vaccine wastage factor** [4]	*Either 2 or 1.6*	1.6	1.6
I	**Number of reconstitution** [5] **syringes (+10% wastage)**	*C x H x 1.11 / G*	112466	114603
J	**Number of safety boxes (+10% of extra need)**	*(F + I) x 1.11 / 100*	11079	9223

If quantity of current request differs from the GAVI letter of approval, please present the justification for that difference.

[4] The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

[5] Only for lyophilized vaccines. Write zero for other vaccines

4 Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

Table 7: Estimated supplies for safety of vaccination for the next two years with TT

		Formula	For year 2005	For year 2006
A	**Target of children for TT vaccination**	#	633252	645284
B	**Number of doses per TT for a woman**	#	2	2
C	**Number of TT doses**	A x B	1266504	1290568
D	**AD syringes (+10% wastage)**	C x 1.11	1405820	1432531
E	**AD syringes buffer stock** [6]	D x 0.25	351455	
F	**Total AD syringes**	D + E	1757275	1432531
G	**Number of doses per vial**	#	20	20
H	**Vaccine wastage factor** [4]	*Either 2 or 1.6*	1.6	1.6
I	**Number of reconstitution** [7] **syringes (+10% wastage)**	*C x H x 1.11 / G*		
J	**Number of safety boxes (+10% of extra need)**	*(F + I) x 1.11 / 100*	19506	15901

If quantity of current request differs from the GAVI letter of approval, please present the justification for that difference.

Change of target population from surviving infants to birth cohort has affected the projected requirements.

[6] The buffer stock for vaccines and AD syringes is set at 25%. This is added to the first stock of doses required to introduce the vaccination in any given geographic area. Write zero for other years.

[7] Only for lyophilized vaccines. Write zero for other vaccines

4 Standard wastage factor will be used for calculation of re-constitution syringes. It will be 2 for BCG, 1.6 for measles and YF.

4. Please report on progress since submission of the last Progress Report based on the indicators selected by your country in the proposal for GAVI/VF support

Indicators	Targets	Achievements	Constraints	Updated targets
• Reduction of cancelled immunization clinics	• 10% reduction by 2003	• Number reduced from >16% to about 9%		• Reduce by 5% in all health facilities
• DPT-HepB+Hib3 coverage increased	• Increase coverage to 80%	• Coverage increased from 74% to 84 in 2003	• Poor documentation by some health workers on children vaccinated	• Attain 80% coverage by all district through RED approach
• Sustain AFP certification status	• Detect 1 AFP case/100,000 pop of <15yrs and quality surveillance	• Certification status achieved		

5. Checklist

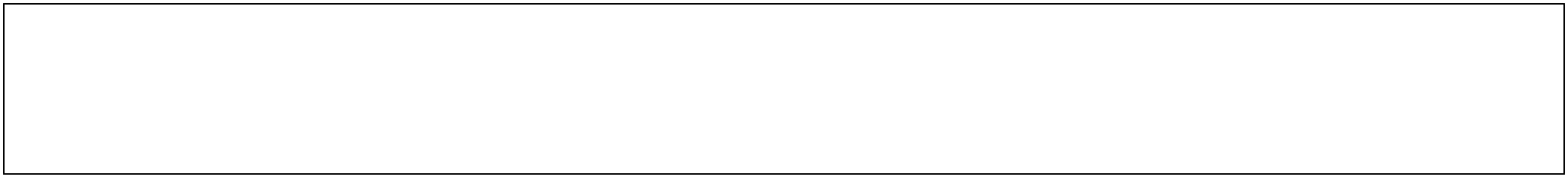
Checklist of completed form:

Form Requirement:	Completed	Comments
Date of submission	25/05/04	
Reporting Period (consistent with previous calendar year)	2/9/03-25/05/04	
Table 1 filled-in	Yes	
DQA reported on	NA	
Reported on use of 100,000 US$	Yes	
Injection Safety Reported on	NA	To be re-submitted later
FSP Reported on (progress against country FSP indicators)	NA	To be re-submitted later
Table 2 filled-in	NA	
New Vaccine Request completed	Yes	
Revised request for injection safety completed (where applicable)	Yes	
ICC minutes attached to the report	No	To be attached later after the proposed meeting to endorse this document
Government signatures	No	To be signed during the proposed

		meeting to endorse this document
ICC endorsed	No	To be endorsed during the proposed meeting to endorse this document

6. Comments

ICC/RWG comments:



7. Signatures

For the Government of Malawi

Signature: ……...……...

Title: ……..…….

Date: ……..…….

We, the undersigned members of the Inter-Agency Co-ordinating Committee endorse this report. Signature of endorsement of this document does not imply any financial (or legal) commitment on the part of the partner agency or individual.

Financial accountability forms an integral part of GAVI/The Vaccine Fund monitoring of reporting of country performance. It is based on the regular government audit requirements as detailed in the Banking form. The ICC Members confirm that the funds received have been audited and accounted for according to standard government or partner requirements.

Agency/Organisation	Name/Title	Date Signature	Agency/Organisation	Name/Title	Date Signature

~ End ~