



Health system strengthening cash support

Guidance note on GAVI's approach to HSS and the application process for 2014

One of GAVI's strategic goals is to "contribute to strengthening the capacity of integrated health systems to deliver immunisation". The following key points outline GAVI's approach to health system strengthening (HSS) cash support:

- The objective of GAVI HSS support is to address system bottlenecks to achieve better immunisation outcomes, including increased vaccination coverage and more equitable access to immunisation. Applications should be based on a strong bottleneck and gap analysis, and present a clear results chain demonstrating the link between proposed activities and improved immunisation outcomes.
- Performance based funding (PBF) is a core approach of GAVI HSS support. Countries' performance will be measured based on intermediate results and a predefined set of PBF indicators against which additional payments will be made to reward good performance in improving immunisation outcomes.
- GAVI's HSS applications require a strong M&E framework, measurement and documentation of results, and an end of grant evaluation. Additionally, independent and recurrent data quality assessments and surveys will be a condition for all HSS applications.
- GAVI supports the principles of alignment and harmonisation and the International Health Partnership, IHP+. The application must demonstrate how GAVI support is aligned with country health plans and processes, complementary to other donor funding, and how it uses existing country systems, such as for financial management and monitoring and evaluation (M&E).
- GAVI supports the use of Joint Assessment of National Strategies (JANS). If a country has conducted a JANS assessment the findings are requested to be included in the HSS application.
- GAVI requests countries to identify and build linkages between HSS support and new vaccines implementation (GAVI New Vaccines Support - NVS) – linkages to routine immunisation strengthening, new vaccine introduction, and campaign planning and implementation must be demonstrated in the application.
- As part of vaccine introductions, GAVI HSS support should be used during pre-and post-introduction for strengthening the routine immunisation system to increase coverage.
- Applications must include details on lessons learned from previous HSS grants from GAVI or support from other sources such as previous NVS, the Effective Vaccine Management (EVM) assessment or Post Introduction Evaluation (PIE) tools, Expanded Program on Immunization (EPI) reviews etc.
- Applications will need to show the complementarity and added value of GAVI support to reducing bottlenecks and strengthening the health system, relative to support from other partners and funding sources and relative to other funding from GAVI specific to new vaccines and/or campaigns.
- GAVI's approach to HSS includes support for community mobilisation, demand generation, and communication, including Communication for Immunisation (C4I) approach.
- GAVI's approach to HSS includes support for strengthening information systems and improving data quality. Strong information systems are of fundamental importance both to countries and to GAVI. GAVI requires that countries have in place routine mechanisms to independently assess the quality of administrative data and track changes in data quality over time.
- GAVI supports innovation. Countries are encouraged to think of innovative and catalytic activities for inclusion in their grants to address HSS bottlenecks to improving immunisation outcomes.
- GAVI strongly encourages countries to include funding for civil society organisations (CSOs) in implementation of GAVI HSS support to improve immunisation outcomes.
- Applications must include information on how sustainability of activities and results will be addressed from a financial and programmatic perspective beyond the period of support from GAVI.
- Applications must include information on how equity (including geographic, socio-economic, and gender equity) will be addressed.

The application and implementation process



Step 1 Expression of interest submission: It is mandatory for countries to inform GAVI secretariat of the intent to apply.

Step 2 Application development and submission: An application for HSS should be developed through a participatory process led by key departments within the MOH (such as Planning, Child Health and EPI), involving a country's Health Sector Coordinating Committee (HSCC), Interagency Coordinating Committee (ICC) or equivalent. GAVI Alliance partners (such as the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), bilateral agencies, CSOs, and other development partners) must also be involved in the process. The application should be aligned with the national health strategy or plan, comprehensive Multi-Year Plan (cMYP), and any other relevant country plans. The application development process should also consist of an iterative engagement, supported by the Alliance. The minister of health and the minister of finance must sign the application in addition to HSCC or ICC members. Applications for HSS are submitted via email to proposals@gavialliance.org.

Step 3 Application screening and pre-review: Applications are screened by the GAVI Secretariat for meeting the mandatory requirements. If incomplete, the Secretariat and partners will work with countries to address any gaps before proceeding. Application pre-review by the Secretariat and partners focuses on validity and consistency of data officially received from countries and coordination with other information sources. Countries may be asked to respond to revisions.

Step 4 Independent Review Committee (IRC): The IRC reviews applications for all types of support. The outcome of the IRC review will be either:
 "Recommended for approval": The application meets all criteria and is recommended for approval of support. Feedback and comments on any key issues will also be provided.

"Recommended for resubmission": The application is incomplete or does not meet all criteria. In this case, details will be provided by the IRC to guide revision of the application, and the country will be invited to resubmit at a subsequent application round.

The IRC recommendations for HSS applications are presented to the GAVI Chief Executive Officer (CEO) for approval. The GAVI Secretariat will inform countries of the IRC recommendations shortly after receipt of the IRC Chair's report.

Step 5 Approval by GAVI CEO: The GAVI CEO will consider and decide on the IRC recommendations. Within subsequent weeks, countries will be notified of the final outcome via a decision letter or update to the Partnership Framework Agreement (PFA), a recently introduced arrangement replacing the decision letter. WHO and UNICEF are also informed, to help facilitate preparations, including vaccine shipments and cash disbursements.

Step 6 Financial management assessment: The GAVI Secretariat conducts a financial management assessment as needed before cash is disbursed through country systems, following which an aide memoire is signed with the country as part of an overarching partnership framework agreement. This aide memoire sets out the reporting requirements relating to the GAVI HSS support.

Step 7 HSS disbursement to country: As a general rule, countries should expect a lead time of approximately six months from receipt of an updated PFA or decision letter to HSS cash disbursement.

Step 8 Routine monitoring and grant evaluation: In addition to routine monitoring and reporting, countries are required to conduct an end of grant evaluation, using existing review mechanisms to the extent possible.

For further information on GAVI HSS Cash Support please email gavihss@gavialliance.org

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2 Chemin des Mines
1202 Geneva
Switzerland

Tel. +41 22 909 65 00
Fax +41 22 909 65 55

www.gavialliance.org
info@gavialliance.org