

Independent Review Committee (IRC) Review Criteria for New and underused Vaccines Support (NVS) in 2017

HPV MR	Specific details relating to HPV and measles and rubella applications are provided in separate guidelines.
-------------------	--

1. Basic functionality of country Coordination Forum (Inter-Agency Coordinating Committee/ Health Sector Coordination Committee (ICC/ HSCC) or equivalent body) including a participatory approach to application development.

- Is the Coordination Forum functional/ active in providing strategic direction, oversight and transparency of the EPI programme (at minimum of Gavi investments) and has it been adequately involved in the current application development process for Gavi?
- Is the Coordination Forum representative of a range of stakeholders with relevant authority that are involved in the country health and immunisation sector (government, key donors, partners, key implementers, CSOs)?
- Does the Coordination Forum adhere to basic governance practices, including developing and sharing a formal TOR and meeting minutes, and adhering to the quorum in meetings?
- Has the Gavi application been developed with the engagement of the range of stakeholders involved in the country health and immunisation sector (government, key donors, partners, key implementers, CSOs)?
- Has the country National Immunisation Technical Advisory Group (NITAG) provided advice whether to introduce the new vaccine?

Section 5.2 provides information on requirements to ensure basic functionality for a national-level Coordination Forum.

2. Evidence based analysis of current immunisation and health programme and status and strong linkage with the support being requested in the application.

- Are the coverage targets proposed reasonable given the history of vaccine coverage in the country?
- Have the lessons from previous vaccine introductions/ campaigns been reflected in the current application?
- Is the new vaccine introduction/ campaign reflected in the cMYP and is there adequate alignment between the new vaccine introduction/ campaign and country health documents?

- Is there adequate justification for vaccine introduction given disease burden and other relevant criteria given the country setting and capacity?
 - For self-procuring countries, is there adequate evidence of country capacity for sustainable procurement?
 - If campaign-style delivery is used, is there evidence to show that campaign activities will also contribute to the strengthening of routine immunisation?
 - Does the country demonstrate adequate readiness for vaccine introduction in terms of cold chain capacity?
- 3. Robust analysis of barriers related to increasing coverage and enhancing equity in access and utilisation of immunisation services (including socio-economic, geographic and gender-related issues) and evidence-driven linkage with programmatic actions to address these issues.**
- Has there been a robust analysis on immunisation equity and are there clear plans to address these?
- 4. Demonstration of prioritising highest impact approaches and strategies.**
- 5. Realistic and logical description of activity plans and budgets, showing that activities are complementary and not duplicative the different types of Gavi support.**
- Is there a logical flow in terms of the activities proposed (for vaccine introduction in the country and specifically the VIG activities) and their linkage with planned objectives?
 - Does the application show that the co-financing requirements will be met?
 - Does the application show the government's commitment for ongoing financing of routine immunisation?
- 6. Adequacy of planned measures to reduce related funding gaps and ensure longer term sustainability.**
- 7. Updated and sound grant performance framework with proposed metrics, baselines and targets to track grant progress and results.**
- 8. Robustness of financial management arrangements for direct financial support.**
- Are the financial management arrangements adequate (e.g. in terms of capacity, planning and systems)?
- 9. Adequacy of country's efforts to improve the availability, quality and use of immunization data.**
- Is there adequate information and evidence to demonstrate that the country is adhering to Gavi's data quality and survey requirements?

Additional review criteria specific to JE vaccine applications

10a. Adequate inclusion of each of the specific requirements, as set out in Section 5.3.2, including:

- Clear rationale for the introduction of JE, using available disease burden data;

- For countries without national or sentinel JE and/ or Acute Encephalitis Syndrome (AES) data, clearly outlined plan to establish systems or conduct studies to collect this data in the JE introduction plan.
- Clear description of the target population, for both the Gavi supported campaign and routine introduction
- Clear plan for both the JE campaign and for the introduction into the routine programme after the campaign
- Provision of estimated date for the introduction into the routine programme and clear plans to ensure no cohorts are missed
- Provision of evidence that the country can fund the introduction of JE in the routine programme

Additional review criteria specific to MenA vaccine applications

10b. Adequate inclusion of each of the specific requirements, as set out in Section 5.3.2, including:

- A jointly prepared application for both routine introduction and one time mini catch-up campaign, including a detailed NVIP for each delivery strategy
- A robust and clear PoA, including all aspects set out in Section 5.3.2 and Annex 7.2, as relevant
- A Risk Assessment Report to determine the epidemiological information on MenA circulation and relevant data, disease burden, the target population at risk, with a statement that WHO has endorsed the report.

Additional review criteria specific to PCV applications

There are no additional review criteria specific to PCV applications.

Additional review criteria specific to Rota vaccine applications

There are no additional review criteria specific to Rota vaccine applications.

Additional review criteria specific to Yellow Fever vaccine applications

10c. Robust and clear Risk Assessment, following guidance set out in Section 5.3.2