

SUBJECT:	CONSENT AGENDA: PROGRAMME FUNDING REQUEST
Agenda item:	02f
Category:	For Decision
Authored by:	Hind Khatib-Othman, Managing Director, Country Programmes

Section A: Overview

1. Executive Summary

- 1.1 This paper requests the Gavi Alliance Board ("Board") to make a programme funding decision related to the recommendations of the 20-28 June 2016 Independent Review Committee ("IRC") as outlined in Section B of this paper as well as to approve an additional amount for the MenA bridge funding that the Board approved in June 2016.
- 1.2 The funding required for this decision includes US\$ 68 million for five new country vaccine programmes and US\$ 2 million in Meningitis A ("MenA") bridge funding for operational costs in 2017, contingent on Board approval of the principles set out in 'Gavi's support for emergency vaccine stockpiles' Board paper (Figure 1 in Doc 13). These amounts have already been provided for as anticipated future demand in the financial forecast that was reviewed by the Board in December 2015 and more recently by the Audit & Finance Committee in October 2016.
- 1.3 The Audit and Finance Committee at its meeting on 21 October 2016 noted that it had reviewed the financial implications of this and other potential funding decisions that may be considered by the Board and concluded that these decisions could be approved by the Board in accordance with the Programme Funding Policy.

2. Recommendations

2.1 The Gavi Alliance Board is requested to:

Programmes

(a) <u>Approve</u> the recommendations of the June 2016 New Proposals IRC for new country vaccine programmes to commence in 2017 and 2018.



Budgets

(b) **Endorse** a net increase in programme budgets by US\$ 68.0 million for the period 2017-2020 to implement the IRC recommendations in (a).

This endorsement would constitute acknowledgement of such budget amounts but would not constitute a funding approval, decision, obligation or commitment of Gavi, the Vaccine Alliance or its contributors.

(c) <u>Approve</u>, subject to the Board approving the principles for "Gavi's support for emergency vaccine stockpiles" (Doc 13), an additional amount of US\$ 2 million for operational support costs for the Meningitis A bridge funding as approved by the Board in June 2016.

Section B: Content

3. New and underused vaccine programmes support (NVS) in Boliva, Myanmar, Niger and Nigeria

- 3.1 Recommended by the June 2016 Independent Review Committee, five NVS programmes are being requested for funding approval at the December 2016 Board meeting. Totalling US\$ 68 million, these five programmes were already provided for as anticipated future demand in the financial forecast that was reviewed by the Board in December 2015.
- 3.2 The IRC commended the countries for providing well conceived proposals, with strong epidemiological justifications. The IRC also acknowledged the countries' financial commitment to support the financing of a new vaccine programme.
- 3.3 Appendix 1 provides an overview of the programmes, with details of issues to be addressed.

4. Meningitis A bridge funding

- 4.1 When the June 2016 Board approved the US\$ 15 million for Meningitis A ('MenA') bridge funding the amount taken into consideration for the operational cost per targeted person was US\$ 0.25. At this meeting, the Board is considering setting the operational cost per targeted person for Meningitis and Yellow Fever emergency campaigns at up to US\$ 0.65 (please refer to the principles for Gavi's support for emergency vaccine stockpiles in Doc 13). If these principles are approved an increase in the amount of the MenA bridge funding by US\$ 2 million would be required.
- 4.2 The Board paper "Gavi's support for emergency vaccine stockpiles" (Doc 13) provides additional detail regarding the recommended change in operational cost support.



Section C: Risk implication and mitigation and Financial implications

5. Risk implications and mitigation

5.1 Approval of this funding request would not materially change Gavi's risk exposure.

6. Financial implications

6.1 The table below summarises the details of this programme funding request:

Country	Vaccine	Request	Year(s)
Bolivia	HPV national	\$ 0.8 m	2017
Myanmar	JEV routine	\$ 0.5 m	2018
Niger	MenA routine	\$ 1.9 m	2017-2020
Nigeria	MenA routine	\$ 14.0 m	2017-2020
Nigeria	Rota	\$ 50.8 m	2018-2020
Sub-total		\$ 68.0 m	
MenA bridge funding		\$ 2.0 m	2017
Total		\$ 70.0 m	

With regard to the availability of resources, the Audit and Finance Committee (AFC) at its meeting on 21 October 2016 noted that it had reviewed the financial implications of the Programme Funding Request and concluded that it could be approved by the Board or Executive Committee in accordance with the Programme Funding Policy.¹

Section D: Implications

7. Impact on countries

7.1 The support requested will enable countries to advance their immunisation plans and conduct national introduction in early 2017/2018. The increase in operational funding of up to US\$ 0.65 per 'targeted person' allows for more robust responses when required.

8. Impact on Gavi stakeholders

8.1 Partners will need to provide technical support to the countries in order to strengthen data quality, cold chain logistics and overall country readiness to introduce new vaccines and routine immunisation coverage and equity.

¹ The AFC further noted that the responsibility of the AFC in this context is to confirm that Gavi has the overall capacity to fund the Request and not to opine on the programmatic merits of the Request.



9. Impact on Secretariat

9.1 The Secretariat will need to include these programmes within its range of activities to support and monitor country programmes.

10. Consultation

10.1 The Gavi Secretariat consulted and continues to engage with Alliance partners and countries to ensure that all necessary actions are undertaken to ensure successful rotavirus, HPV, JEV and Meningitis A introductions.



Appendix 1: Further details of IRC-recommended proposal

IRC Review of New Applications (June 2016) included in this Programme Funding Request

Extracted from the New and underused vaccine support (NVS) Independent Review Committee's Report. A full copy of the IRC report is available upon request.

Country	Type of	Outcome	Issues to be addressed within 30 days of
	Support		receipt of the final IRC report
Bolivia	HPV	Approval	related to the following topics: budget, cold
	National		chain, partners funding for training, training
			activities, missing targeted interventions for
			out of school girls, lack of information on how
			private school girls will be reached, lack of
			clarity around costing of vaccine delivery.
Myanmar	JE routine	Approval	related to the following topics: Costs for post-
l			campaign evaluation, remaining gaps in the
			cold chain, lack of detail detailed of information
			on AEFI surveillance and mitigation strategies
			for adverse events, and budget
			inconsistencies.
Niger	MenA	Approval	related to the following topics: strategies to
	routine		address hard to reach zones and vulnerable
			populations, budget details and synergies with
			other immunization interventions, monitoring
			and evaluation (proposed indicators) and co-
			financing
Nigeria	MenA	Approval	related to the target population estimations for
	routine		the two phases of the Men A mini catch-up
			campaign
Nigeria	Rota	Approval	related to the need for a funded strategy for
			increasing coverage in states with DTP3
			coverage < 70%

The countries provided relevant and comprehensive replies to the issues identified by the IRC. The Secretariat reviewed this information and recommend to move forward with these introductions.