

# **GAVI Alliance Board Meeting**

30 November – 1 December 2010 Kigali, Rwanda

# FINAL MINUTES

### 1 Welcome, Executive Session, and Approval of Outstanding Minutes

Finding a quorum of members present<sup>1</sup>, the meeting commenced at 8.30 on 30 November 2010. Mary Robinson, Chair of the GAVI Alliance Board, chaired the meeting. The meeting began in executive session to discuss the appointment of a new Chair. Dagfinn Høybråten, Unaffiliated Board Member, did not attend this session. The Board then moved into general session at 9.51.

The Chair noted that it was a wonderful opportunity to have the meeting in Rwanda during the Mother and Child Health Week in Rwanda. She noted the success of the launch event which took place on 29 November 2010 at the Roweser Health Clinic in the Northern Province of Rwanda to launch the nationwide campaign focusing on helping communities to make more informed health decisions.

The Chair highlighted recent GAVI news, including IFFIm's entry into the Australian bond market with the successful launch of a Kangaroo bond, and the recent drop in price of the pentavalent vaccine. She welcomed the new Board members and alternates who were attending their first Board meeting, and invited Leone Gianturco, the Governance Committee's nominee as the Italy/Spain constituency alternate, to sit at the Board table as the constituency's representative until his formal appointment. The Chair recognised this would be the final meeting for Anders Molin and thanked him for his time and dedication.

The Board considered approval of outstanding minutes (Doc #1 in the board pack).

# **Resolution One**

The GAVI Alliance Board resolved to:

• <u>Approve</u> the minutes of its meeting on 16-17 June 2010.

<sup>&</sup>lt;sup>1</sup> Board member participants are listed in Attachment A.

### 2 Report of the Governance Committee

Mary Robinson, Governance Committee Chair, delivered a review of committee activity since the June Board meeting (Doc# 2). She reported that the Governance Committee had met three times since the June Board meeting, focusing on the search for a new CEO and a new Chair of the Board.

She announced that the Board in its executive session unanimously appointed Mr Høybråten to serve as Board Chair for a two-year term. Mrs Robinson congratulated Mr Høybråten on his appointment, noting he has "all the qualities, complete commitment and understanding of developing countries, and is ready for the burden of time commitment." Discussion followed:

- George W. Wellde, Jr., chair of the search committee described the process that led to the recommendation of Mr Høybråten. The search committee had been impressed by his management skills, leadership, financial management, and answers to hard questions.
- Board members expressed their gratitude to the search committee and the process it used to identify a candidate for this appointment.
- Mr Høybråten was unanimously supported by Board members and Board members' constituencies and a number of individual expressions of goodwill and support for Mr Høybråten's appointment were provided by members of the Board.
- Mr Høybråten thanked the Board members for their support and goodwill and pledged to put his full heart into his new post. He acknowledged the challenges ahead but also the potential good that could come from success. He reiterated his commitment to remain independent and concluded by thanking Mrs Robinson for her service.
- Finally, Mr Wellde recognised Mrs Robinson's service to GAVI over the past decade and submitted a formal resolution, unanimously adopted by the Board, to thank her for her contribution on behalf of children and mothers.

### **Resolution Two**

The GAVI Alliance Board resolved to:

• <u>Appoint</u> Dagfinn Høybråten as Chair of the Board with individual signatory authority as of 1 January 2011 until 31 December 2012.

Mr Høybråten did not participate in the above decision.

• <u>Recognise</u> Mary Robinson, Chair of the GAVI Alliance, for her commitment to ensure all children have access to immunisation and enjoy the right to the highest attainable standard of health. Since Nelson Mandela invited her to join the Vaccine Fund in 2001, Mary Robinson has contributed her energy,

insight, and vision to bringing about a world where children have the opportunity to start life with the prospect of living a healthy life. To date, GAVI has saved more than five million lives in its first decade and has protected many others from falling ill or suffering disabilities. Through her leadership, Mary Robinson has advocated how modern development should be undertaken, how empowering women can help families reach their full potential, and that the world has a responsibility to children who do not have a voice. Mary Robinson has been their voice, reminding humanity of a right to health for every child, everywhere.

The Chair continued with the Report of the Governance Committee and presented the Committee's nominations for seats on the Board (Doc #02). She highlighted the nomination of the representative as alternate to Minister Guillermo González González representing the Developing Country constituency as being an exception to the Guidelines on the GAVI Alliance Board Gender Balance. The Committee carefully considered this nomination and recognised in particular the communication difficulties because of different languages among the various constituents within this constituency group. The Chair noted that the Governance Committee was recommending a shorter term than would normally be the case to allow the constituency to be represented while allowing time to find a replacement alternate Board member in keeping with the Guidelines on Board Gender Balance.

The Chair reminded the Board of the Guidelines on Board Gender Balance which had been approved by the Board and asked the Board to ensure future compliance.

The Chair presented the Governance Committee recommendations for committee membership and chairs.

The Chair highlighted that Gavin McGillivray was stepping down from his role as a member of the Audit & Finance Committee. She noted that the Board wanted to express appreciation to him for his long service to GAVI.

The Chair invited Mr Høybråten to update the Board on the CEO search. Mr Høybråten reported that in August, the Board appointed a CEO search group, consisting of the Chair, Vice Chair, the Interim CEO, Mr Wellde, and a wider group of Board members as a reference group. He noted that the search group has carried on a transparent process and involved the entire reference group in every step of the process. A long list of candidates was presented to the entire reference group from Egon Zehnder, the search consultant, and the search group is working to shorten the list to a group for interview in late January 2011.

The Chair then invited Debbie Adams, Managing Director of Law & Governance, to present the Governance Committee's recommendation to amend the By-Laws which would allow minutes to be approved through a no-objection voting procedure (Doc #02b). Ms Adams presented the recommendation of the Governance Committee and suggested that the Board consider revised wording for the amendment of the By-Laws.

After discussion it was agreed that the Governance Committee recommendation of a minimum of five business days to review draft minutes may not allow enough time and the Board agreed on providing eight business days for such review.

### **Resolution Three**

- (Re)appoint the following members of the GAVI Alliance Board with the following terms:
  - **Wayne Berson** as an Unaffiliated Board Member effective immediately and until 31 December 2013
  - Dwight Bush as an Unaffiliated Board Member effective immediately and until 31 December 2013
  - **George W. Wellde Jr** as an Unaffiliated Board Member effective immediately and until 31 December 2013
  - Flavia Bustreo as Board Member representing the World Health Organization effective immediately and until her successor is appointed and qualified
  - Anders Nordström as Board Member representing Donor Governments to succeed Anders Molin effective immediately and until 31 December 2011
  - **Leone Gianturco** as Alternate Board Member representing Donor Governments effective immediately and until 31 December 2011
  - Elías Antonio Guevara Ordóñez as Alternate Board Member to Minister Guillermo González González representing Developing Country Governments to succeed Nora Del Transito Orozco Chamorro effective immediately and until 31 June 2011.
- **<u>Reappoint</u>** the following members of the Audit and Finance Committee until the Committees are refreshed for the 2012 year:
  - o Magid Al-Gunaid
  - o Wayne Berson
  - o Dwight Bush
  - o David Crush
  - Clarisse Paolini
  - Anne Schuchat
- (**Re)appoint** the following members of the Governance Committee until the Committees are refreshed for the 2012 year:
  - $\circ \quad \text{Amie Batson} \quad$
  - o Alan Hinman
  - o Dagfinn Høybråten
  - Jaime Sepulveda
  - Richard Sezibera
  - Pascal Villeneuve
  - Sian Clayden
  - George W. Wellde Jr
  - Helen Evans (non-voting).

- **<u>Reappoint</u>** the following members of the Investment Committee until the Committees are refreshed for the 2012 year:
  - o Dwight Bush
  - Abigail Robinson
  - o George W. Wellde Jr.
- (Re)appoint the following members of the Programme and Policy Committee until the Committees are refreshed for the 2012 year:
  - Magid Al-Gunaid
  - Joan Awunyo Akaba
  - o Mickey Chopra
  - Paul Fife
  - Ashutosh Garg
  - o Leone Gianturco
  - o Gustavo Gonzalez-Canali
  - Nguyen Tran Hien
  - Suresh Jadhav
  - Rama Lakshminarayanan
  - Steve Landry
  - Susan McKinney
  - Jean-Marie Okwo-Bele
  - Anders Nordstrom
  - Olga Popova
  - Anne Schuchat
  - Helen Evans (non-voting)
  - Helen Rees (non-voting expert advisor)
- (Re)appoint the following Chairs of the Committees:
  - Wayne Berson as Chair of the Audit and Finance Committee
  - Dagfinn Høybråten as Chair of the Governance Committee
  - o Jaime Sepulveda as Vice Chair of the Governance Committee
  - George W. Wellde Jr as Chair of the Investment Committee
  - Gustavo Gonzalez-Canali as Chair of the Programme and Policy Committee
- <u>Appoint</u> the following member of the Executive Committee until the Committee is refreshed for the 2012 year:
  - Amie Batson in the seat currently occupied by Gustavo Gonzalez-Canali
- <u>Amend</u> the By-Laws of the GAVI Alliance as follows:
  - Introduce a new By-Laws section 2.7.3.3:

The Board may approve the minutes of its meetings on a noobjection basis. On such basis, and subject to further procedures set by the Board, a motion to approve the minutes shall be deemed approved if the following conditions are met: (i) draft minutes are circulated to the Board at least once for review and comment, (ii) a period of no less than 8 business days is given for Board Members to provide comments to the initial draft minutes ("Review Period"), (iii) Notice of a request to approve the minutes is made after the conclusion of the Review Period in writing and sent by mail to the last recorded address of each Board Member, or by email, (iv) a period of no less than 10 calendar days is given for Board Members to signal an objection in writing or by email ("Objection Period"), and (v) no objections to the motion are received by the Chair, CEO, or Secretary by the conclusion of the Objection Period.

## 3 Country Report

Dr Richard Sezibera, Minister of Health of Rwanda, delivered a report on his country's progress in reaching the Millennium Development Goals. He presented trends in immunisation coverage and highlighted the GAVI contribution to immunisation services and other factors. Finally, Dr Sezibera provided information on how health workers are using technology, particularly texting to collect and transmit data.

• Many Board members commented on the quality of the presentation and the impressiveness of Rwanda's achievements, citing the increase in immunisation coverage and decline in infant mortality. Board members praised the commitment of the Rwandan Government to health for all.

## 4 CEO Report

Helen Evans, Interim CEO, delivered a presentation on GAVI Alliance achievements and challenges (Doc #4). Ms Evans began with the Rwanda immunisation success story, highlighting the fact that Rwanda had one of the highest immunisation rates in the world and that Minister Sezibera has been one of immunisation's biggest proponents.

Next, Ms Evans provided an overview of the key decisions being asked of the Board and summarised GAVI achievements to date, including over five million future deaths prevented since inception, noting that the estimate includes deaths prevented through the introduction of pneumococcal and rotavirus vaccine. She also profiled challenges GAVI faces, including the goal of raising an addition US\$3.7 billion to fully fund the Alliance's ambition to 2015, and the fact that 20 countries still have a DTP3 coverage rate of less than 70%. Finally, Ms Evans highlighted the success of awareness efforts such as World Pneumonia Day and then reported on resource needs, ending with a call for action and support. Discussion followed:

- Board members congratulated Ms Evans on her stewardship of GAVI during this interim period.
- The decline in the price of pentavelent vaccine is welcome as the funding challenge will not only be closed by donations, but also by price drops.

- Board members recognised Secretariat and partner efforts to reduce administrative costs and to continue diligence around staffing needs.
- Several positive comments were made on GAVI's involvement with meningitis A vaccine rollout. Meningitis takes the form of rolling epidemics and not only kills and disables young people under 30 years old, but has a debilitating effect on families and the community.
- Finally, some Board members discussed their concern about the GAVI eligible countries which are screened out for new vaccines because of their low DTP3 coverage. GAVI and its partners need to ensure a strategy to focus on these countries.

## 5 Financial Forecast Update

Barry Greene, Managing Director, Finance and Operations presented the Financial Forecast Update (Doc #09b). He explained in detail the US\$ 7.7 billion in projected cash outflows and the funding challenge of \$3.7 billion for the period 2010-2015. The funding challenge had reduced by \$600 million since March 2010 due to pledges of contributions received since then. He also presented several scenarios for cash inflows and what those would entail for programme support. Following discussion:

- Mr Greene confirmed that the pentavalent price reduction is not yet included in the forecast.
- The United Kingdom offered to co-host the pledging conference in London next June. France and the Bill & Melinda Gates Foundation offered to work with the UK to mobilise support for the conference.
- Paul Fife, Board member representing donor governments Norway/United Kingdom/Ireland announced that Norway was working to secure an 8% increase to its multiyear contribution.
- Anders Molin, Board member representing Netherlands/Sweden/Denmark announced that, as of January 2011, Sweden's relationship with GAVI would transfer from SIDA to the Ministry of Foreign Affairs. He noted that the average annual contribution has been roughly 100 million SKr and that the intention was to increase this number by 50% starting in 2011.

## 6 Resource Mobilisation and Innovative Finance

Joelle Tanguy, Managing Director, External Relations delivered a report on GAVI's resource mobilisation efforts and Paolo Sison, Director, Innovative Finance gave a brief overview of the work of the Innovative Finance team (Doc #06). Over the next five years, support from GAVI can help immunise 243 million children compared to 256 million children immunised in GAVI's first 10 years. If donors sustain current levels of commitments, GAVI would face a US\$ 2.5 billion funding gap. Therefore, a step-change is required by 2012 when demand may plateau at approximately US\$

1.5 billion per year. Ms Tanguy pointed to the strong preference for a new "multiyear pledging system" to better align with the multiyear nature of programme commitments. She reviewed the funding scenarios presented earlier, referencing what could and, in some cases, would not be achieved given donor pledges. Discussion followed:

- There are two principal inflows that will address the funding challenge: direct contributions and innovative finance. To date, innovative financing projects have been donor driven and Board members expressed a desire to see IFFIm continue to be promoted and further funded. Further, Board members wish to see new project ideas for mobilising additional resources from the private sector. The Secretariat noted there are interesting ideas around private sector engagement but that it is difficult at this time to quantify the resources that could be generated and to determine timing.
- As part of the resource mobilisation strategy, the Board would like to see a number of messages and outcomes promoted, including:
  - Vaccine price reductions
  - A focus on the opportunity to save five million lives over the next five years;
  - A need to maintain consistency in delivery and ensure that vaccine programmes continue on pace;
  - Create and nurture political will to ensure governments continue to champion vaccination (both donor and recipient countries); and
  - o Better reach and influence the tax payer with the GAVI message;
  - Increased mobilisation of resources from the private sector.

## 7 Report of the Executive Committee

Jaime Sepulveda, Chair of the Executive Committee delivered a report on the activities of the Committee since the Board meeting in June 2010 (Doc #07). He discussed the Committee's decision to recommend the business plan and to call for a new round of programme applications with a deadline of 15 May 2011, noting the need to maintain momentum and confidence in GAVI. He also stressed that the financial challenge is the single most important issue facing GAVI, and the GAVI Alliance must find the right balance between optimism and prudence.

# 8 GAVI Alliance Strategy

Ms Evans presented the Business Plan 2011–2015 (Doc #07a–f). Since June 2010, the GAVI strategy for 2011-2015 has gone through a review process and a few amendments have been recommended by the Executive Committee. Ms Evans noted in particular that the Secretariat and partners had clearly heard the Board's request for a flat line budget and had in fact brought in a business plan budget for 2011 that was lower than the 2010 budget. The Secretariat plans to establish a performance unit to measure performance and report on deliverables.

Ms Evans highlighted the principal risks with the business plan and drew the Board's attention to three high risks areas, also noted by the Director of Internal Audit:

resource requirements, misuse of funds, and Secretariat capacity. She also reviewed amendments to the strategy document recommended by the Executive Committee. Discussion followed.

- Several Board members preferred the original wording for strategic goal #4 ("Shape vaccine markets") as opposed to the suggested wording ("Shape vaccine markets for poor countries"), arguing that while the current wording may be seen as overly ambitious, the ambition serves GAVI's interests. Furthermore, the term "poor countries" is vague. After discussion, the Board decided to leave the wording in the form agreed at the June 2010 Board meeting.
- Cristian Baeza, Board member representing the World Bank commented that there are conflicts of interest involved in moving partner organisations which have Board representation to performance-based contracting and that the World Bank had declined funding from GAVI for this reason. He requested the Governance Committee review these arrangements. It was noted that this risk had been added to the risk register.
- The Board agreed that the business plan is a living document and may therefore require changes from time to time.

### **Resolution Four**

The GAVI Alliance Board resolved to:

- **<u>Approve</u>** the following revisions to the GAVI Alliance Strategy 2011 2015
  - Add: Operating Principle 6: "Ensuring gender equity in all areas of engagement."
  - Amend: Strategic Goal 2, Strategic Objective 2: "Increase equity in access to services."
  - o Delete: Strategic Goal 4, Goal level indicator 2 in its entirety.
  - Delete: Strategic Goal 4: Strategic Objectives 1-4.
  - Add New: Strategic Goal 4: Strategic Objective 1: "Ensure adequate supply to meet demand."
  - Add New: Strategic Goal 4: Strategic Objective 2: "Minimise costs of vaccines to GAVI and countries."
- <u>Approve</u> the GAVI Alliance Business Plan 2011–2015 as described in Docs #07b and 07c

## 9 GAVI Alliance Business Plan Budget

Mr Greene presented the business plan's associated budget (Doc #07g) and noted that the Audit and Finance Committee and Executive Committee had reviewed it. Mr Greene highlighted in particular that the budget represents 13% of GAVI's total expenditure in 2011 and is a 9% reduction over the 2010 budget. Discussion followed:

- The Board noted that eleven of the nineteen staff positions being requested as part of this budget were to address two key areas of risk: resource requirements and misuse of funds. In addition, the Secretariat's administrative costs are low compared to similar organisations, a conclusion highlighted in the evaluation.
- The Board requested an analysis on how GAVI funds multilateral partners. It was noted that a task team may be set up to examine this issue.
- Ms Evans highlighted that the business plan included a wage freeze, reduction in use of consultants, cutbacks in travel, and a move towards a strict economy regime for travel.

### **Resolution Five**

The GAVI Alliance Board resolved to:

- **<u>Approve</u>** the GAVI Alliance Business Plan Budget as follows:
  - US\$ 126 million for 2011 for programme implementation and mission support
  - US\$ 1.8 million for 2011 for capital expenditure; and
  - US\$ 126 million provisionally for 2012
- <u>**Request**</u> the Secretariat to present a detailed budget for 2012 to the Executive Committee for guidance and further recommendation to the Board.

### **10 Report of the Investment Committee Chair**

George W. Wellde, Jr., Investment Committee Chair provided an overview on the capital markets environment, focusing on emerging market countries and an update on GAVI's investment portfolio. The portfolio performed in line with expectations and exceeded its benchmark. It was noted that GAVI continues to diversify investment managers and their mandates.

# 11 Report of the Audit and Finance Committee Chair

Wayne Berson, Audit and Finance Committee Chair delivered a report on the activities of the Committee since the June Board meeting (Doc #09). The Committee tabled audit and tax engagement letters and recommended them for approval (Doc #09a). It was noted that there is a slight increase in fees measured in US Dollars but this is a result of depreciation of the US Dollar against the Swiss Franc.

## **Resolution Six**

- <u>Appoint KPMG SA/AG as the independent auditor of the GAVI Alliance for</u> 2010
- <u>Appoint</u> KPMG SA/AG to provide Swiss tax services for the GAVI Alliance for 2010

- <u>Appoint</u> KPMG LLP to provide United States tax services for the GAVI Alliance for 2010
- <u>Approve</u> the 2010 audit and tax engagement letters with KPMG SA/AG and KPMG LLP.

# 12 Risk Oversight

Cees Klumper, Director of Internal Audit delivered a report on risk management (Doc #10). He talked about the Board's role in risk management, discussed how risk is monitored, and how identified risks are mitigated and managed. Following discussion:

• The Board recommended that brand management should be added to the risk register since the GAVI brand forms part of the basis to raise funds and fulfil the mission.

# **13 Report of the Evaluation Advisory Committee**

In 2009, the Board commissioned a second evaluation of GAVI, focusing on the years 2006 to 2010.<sup>2</sup> It was completed in September 2010 (Doc #05) and distributed to the Board. Ms Evans reported that Bernhard Schwartländer, Evaluation Advisory Committee Chair was unable at short notice, to attend the Kigali meeting. This being the case it seemed more appropriate to defer a more detailed discussion of the evaluation until the Board retreat in April 2011 when the evaluator would also be able to attend. Richard Sezibera, a member of the Evaluation Advisory Committee provided an overview of the oversight process for the evaluation, noting that the report is comprehensive and well-balanced.

# 14 Report of the Programme and Policy Committee Chair

Gustavo Gonzalez-Canali, Programme and Policy Committee (PPC) Chair updated the Board on the activities of the Committee since the June 2010 Board meeting (Doc #11). He commented on the work of the Co-financing Task Team and that a Supply Strategy Task Team intended to provide a report to the Board during 2011.

Dr Gonzalez-Canali reminded the Board that it had asked the PPC to review the indicator used to assess financial sustainability, which is included as a component in the pilot prioritisation mechanism.<sup>3</sup> While registering the strong objection of committee member, Majid Al-Gunaid and his constituency, and acknowledging its limitations, the PPC confirmed its recommendation to the Board that general government expenditure on health as a percentage of total government expenditure continued to be most PPC members' preferred indicator. Vice Minister Al-Gunaid confirmed to the Board his and his constituency's continued objection to the indicator.

<sup>&</sup>lt;sup>2</sup> See Section 7 of the 2-3 June 2009 Minutes

<sup>&</sup>lt;sup>3</sup> See Resolution 5 in the 16-17 June 2010 Minutes

# 15 Health System Strengthening (HSS) Window

Carole Presern, Managing Director, Special Projects reported on the Health Systems Funding Platform, (Doc #11a-b) requesting approval on two issues: country eligibility for GAVI HSS programmes and the use of the unallocated notional amount of funds from the original HSS funding envelope for HSS programmes. As part of the report, Dr Presern updated the Board on platform activities and plans for 2011. Discussion followed.

- Different eligibility requirements are confusing to countries and excluding lowmiddle income countries sends the wrong message. It was agreed that GAVI should rely on the prioritisation mechanism should sufficient funds not be available.
- It would be helpful to develop indicators focusing on how funding for health systems impact immunisation goals.
- GAVI should engage more proactively with civil society in administering the HSFP.
- Given the development of the HSFP, the original window should be closed and the notional amount of US\$ 179 million in that original window should be available for any programme funding.

### **Resolution Seven**

- <u>**Decide</u>** that all GAVI eligible countries should be eligible for the health system funding platform;</u>
- <u>Decide</u> to close the original Health Systems Strengthening (HSS) window and release the notional amount of US\$ 179 million that remains unallocated from that original window;
- <u>**Decide</u>** that the projected three-year rolling average share of expenditure on cash-based programmes within GAVI's overall programmatic expenditure should be within the range of 15-25% of the total;</u>
- <u>**Request**</u> annual projections of expenditure on cash-based programmes within GAVI's overall programmatic expenditure to inform decision making on resource allocation and routinely report on the impact of this investment on improving immunisation;
- <u>Request</u> the Secretariat to establish mechanisms to ensure that GAVI funding through the cash-based programmes are designed to have a reasonable and demonstrable impact on immunisation programmes in the context of integrated service delivery, and that immunisation coverage is a credible outcome indicator for these activities;

- <u>Request</u> that, in light of the proposed changes to GAVI's cash based programmes and the new resource envelope, an evaluation of the projected impact of these investments on improving immunisation programmes be conducted within two years in the context of the evaluation plan; and
- **<u>Request</u>** the PPC to review the prioritisation mechanism to take into account the Board's discussion on income levels.

### 16 Incentives for Routine Immunisation Strengthening (IRIS)

Peter Hansen, Director, Monitoring & Evaluation presented the PPC recommendations on a proposed new performance-based funding window – Incentives for Routine Immunisation Strengthening (IRIS). IRIS was designed to increase immunisation coverage and equity in countries with DTP3 coverage of less than 70%.

Dr Hansen addressed the need to assess the suitability of IRIS in India and Nigeria. He then discussed the phase out of ISS and the details of the IRIS window, including the fact that IRIS grants would be comprised of both a fixed payment and a performance payment. Discussion followed.

- The Board generally welcomed the concept of a results based financing initiative, but there was concern that countries, particularly those with low immunisation coverage indicating weak systems, may find IRIS complex and difficult to implement. Also, questions were raised about where IRIS fits into GAVI's overall cash programmes framework.
- Regarding whether or not the ISS window should continue, some Board members expressed concern over the fact that a number of countries would be excluded under IRIS if support were limited to those countries with less than 70% DTP3 coverage as recommended by the PPC. Other Board members referred to the earlier decision to allow all countries to access HSS as a mitigating factor.
- Notably, ISS is not benefitting countries with less than 70% DTP3 coverage as last year none of these countries received an ISS reward. Nevertheless, developing country representatives strongly objected to the decision to close the ISS window, on the grounds that it is an important source of support to countries.

### **Resolution Eight**

- **Decide** to pilot IRIS;
- <u>Decide</u> to suspend the November 2009 decision of the Board to raise the filter to 70% thereby reestablishing the filter to 50% for DTP3 coverage for the upcoming round of applications;

- <u>**Request**</u> the PPC to provide the Board at the retreat in April 2011 with a comprehensive approach on cash-based support to countries including a strategy for countries that are below 70% DTP3 coverage or have stagnating or declining coverage; and
- **<u>Request</u>** the PPC to define the implementation of the IRIS pilot.

# **17 Co-financing Policy Revisions**

Santiago Cornejo, Acting Director, Country Grants and Reviews, Programme Delivery presented the PPC recommendation for a proposed revised Co-financing Policy (Doc #11d). The PPC proposed new country groupings, revised co-financing levels and process for graduating countries. Discussion followed:

- Minister Sezibera brought to the Board's attention a letter from Minister González, Board member representing Latin America and Eastern Europe expressing reservations with the co-financing policy and proposing an alternative approach.
- Board members expressed concern on sustainability for graduating countries and stressed the importance of in-country dialogue and a clear communication strategy with these countries.
- It was noted that co-financing for rotavirus vaccine, which is available in a 2 and 3 dose presentations, would be reviewed by the Supply Strategy Task Team in due course.

## **Resolution Nine**

The GAVI Alliance Board resolved to:

- <u>Approve</u> the revised GAVI Alliance Co-Financing Policy as presented in Doc#11d, pages 13-15; and
- <u>**Request**</u> that the PPC review the concerns raised by Minister Guillermo González González in a letter to the Chair of the PPC and report to the Board in June 2011.

# **18 Accelerated Vaccine Introduction (AVI) Progress Report**

Jon Pearman, Director AVI provided an update (Doc 11e). The GAVI Alliance target is that the pneumococcal vaccine is rolled out in 45 countries by 2015 and rotavirus vaccine in 33 countries – assuming no financial constraint. He highlighted that the pneumococcal vaccine supply is tight for 2011-12, but is being managed. Beyond 2013, supply appears to be solid based on indications from suppliers. Mr. Pearman ended by discussing other challenges preventing introduction of new vaccines. Discussion followed:

- The Chair noted the importance of linking AVI activities with broader advocacy messages and the GAVI replenishment.
- It was noted that AVI has created an effective platform for, and provided important lessons on, the roll out of future vaccines.

### **19 Update on Country Programmes**

Mercy Ahun, Managing Director, Programme Delivery provided an update on country programmes. Dr Ahun noted that nineteen countries introduced pentavalent this year, the highest number in any single year. The number of children not immunised with basic vaccines (DTP3) globally has decreased by 15% from 26.7 million in 2005 to 23.2 million in 2009, but there are still challenges with large numbers of unimmunised children in GAVI eligible countries. Dr Ahun also reviewed progress on cash programmes and highlighted success in countries such as Vietnam, Cambodia and Rwanda, but pointed to challenges related to delayed implementation by certain countries or delayed disbursement by GAVI.

## 20 Civil Society and the GAVI Alliance

Faruque Ahmed, Board Member representing civil society, Valerie Browning, Programme Coordinator, Afar Pastorialist Development Association and Legesse Kidanne, Programme Developer presented a video on CSOs and delivered a short presentation on civil society and GAVI.

Ms Browning and Mr Kidanne thanked GAVI for its support of immunisation efforts in Ethiopia and presented a video which highlighted some of the challenges to providing immunisation in Ethiopia and how GAVI and other partners have helped to overcome those challenges. There was a concern that the Ethiopia project's funding could be terminated; the Secretariat agreed to look into the situation.

## 21 Closing

The Chair concluded the meeting by giving special thanks to Minister Sezibera and his staff for all their hard work in hosting the Board meeting, for the site visits and dinner and congratulated the Board on an excellent meeting.

There being no further business, the meeting was brought to a close.

Ms Debbie Adams Secretary to the Board

## Attachment A

### **Participants**

#### **Board Member Participants**

- Mary Robinson, Chair
- Jaime Sepulveda, Vice Chair
- Faruque Ahmed
- Cristian Baeza
- Amie Batson
- Wayne Berson
- Toupta Boguena
- Dwight Bush
- Paul Fife
- Ashutosh Garg
- Leone Gianturco (Alternate)\*
- Gustavo Gonzalez-Canali
- Magid Al-Gunaid (Alternate)
- Saad Houry
- Dagfinn Høybråten
- Suresh Jadhav
- Anders Molin
- Jean-Marie Okwo-Bele (Alternate)
- Anne Schuchat
- Richard Sezibera
- Jean Stéphenne
- George W. Wellde Jr.
- Helen Evans (Non-voting)

### Regrets

- Guillermo González González
- Trinh Quan Huan

#### Alternates Observing

- Agnès Binagwaho
- Sian Clayden
- Alan Hinman
- Stefan Kaufmann
- Abigail Robinson
- Rajeev Venkayya\*\*
- Annie Vestjens

\* Elected at this meeting

\*\* Served as the eligible organisation's voting member per Section 2.6.5 of the By-Laws

### **Additional Attendees**

#### WHO

- Lidija Kamara, Partnership Coordinator
- Patrick Kadama

#### UNICEF

- Ibrahim EI-Ziq, Chief of Immunisation, Supply Division
- Ann Ottosen, Contracts Manager, Supply Division

#### THE WORLD BANK

• David Crush, Senior Financial Officer, Multilateral Trusteeship and Innovative Financing

#### **BILL & MELINDA GATES FOUNDATION**

- Steve Landry, Deputy Director
- Rob Lin, Deputy Director, Global Health, FP&A
- Violaine Mitchell, Senior Program Officer
- Nicole Bates, Senior Program Officer, Global Health Policy & Advocacy

#### AUSTRALIA

- Timothy Poletti, Health Adviser, Development Cooperation, AusAID
- Natalie Cohen, Director, Health and HIV Thematic Group, AusAID

#### CANADA

- David Stevenson, Director General, Canadian International Development Agency (CIDA)
- Zuzanna Lipa, Development Officer, Canadian International Development Agency (CIDA)

#### **EUROPEAN COMMISSION**

• José António Valente, Head of Social Sector, Unit C4, Centralised Operations for the ACP countries

### Attachment A

#### **FRANCE**<sup>4</sup>

#### GERMANY

• Angelika Schrettenbrunner, Adviser to the Ministry of Economic Cooperation and Development (BMZ)

**ITALY**<sup>5</sup>

#### NORWAY

Lene Lothe, Senior Health Adviser, Norad

#### SPAIN

Miguel Casado Gómez, Chief of Health Sector, Planning and Evaluation of Development Policies, Secretary
of State for International Cooperation

#### SWEDEN

• Oscar Ekéus, Desk Officer, Ministry for Foreign Affairs

#### UNITED KINGDOM

- Julia Watson, Senior Health Economist, DFID
- Simon Bland, Counselor, Specialised Agencies, Permanent Mission to the United Nations, Geneva

#### UNITED STATES OF AMERICA

• Susan McKinney, Senior Technical Advisor for Immunization, USAID

#### CIVIL SOCIETY ORGANISATIONS

- Joan Awunyo-Akaba, National Vice Chairperson, Coalition of NGOs in Health, Ghana
- Valerie Browning, Programme Coordinator, Afar Pastoralist Development Association, Ethiopia
- Sabrina Bakeera-Kitaka, President, Uganda Paediatrics Association
- Legesse Kidanne, Programme Director, Consortium of Christian Relief and Development Associations (CCRDA/CORE Group), Ethiopia

#### VACCINE INDUSTRY- DEVELOPING COUNTRY<sup>6</sup>

#### VACCINE INDUSTRY- INDUSTRIALISED COUNTRY

- Kathleen Vandendael-Baudrihaye, Director, International Relations, Policies and Partnerships, GSK Biologicals
- Olga Popova, Senior Director, Government and Medical Affairs, Crucell Switzerland AG
- Joan Benson, Executive Director, International Organisations, Merck
- Jacqueline Keith, Vice President, International Trade Relations and Health Affairs, Pfizer Inc.
- Lynn Bodarky, Senior Director, Pfizer Inc.
- Isabelle Deschamps, Director, Global Immunisation Policy, Sanofi Pasteur

#### **RESEARCH AND TECHNICAL HEALTH INSTITUTES**

- John Wecker, Global Programme Leader, Vaccine Access and Delivery, PATH
- Philippe Stoeckel, Chairman, Agence de Médecine Préventive (AMP) à l'Institut Pasteur
- Alfred da Silva, Executive Director, Agence de Médecine Préventive (AMP) à l'Institut Pasteur

#### ADDITIONAL OBSERVERS

- Loay Al-Aswadi, Special Adviser to the Minister of Health, Yemen
- Sean Carney, Audit Committee Chair, IFFIm Board
- Marta Espelta, Programme Officer, La Caixa Foundation

<sup>&</sup>lt;sup>4</sup> Represented by Gustavo Gonzalez-Canali, Board member

<sup>&</sup>lt;sup>5</sup> Represented by Leone Gianturco, alternate Board member

<sup>&</sup>lt;sup>6</sup> Represented by Suresh Jadhav, Board member

### Attachment A

- Alan Gillespie, Board Chair, IFFIm Board
- Tim Siegenbeek van Heukelom, Research Associate, Pacific Friends of the Global Fund, Australia
- Clifford Wurie Kamara, Senior Programme Officer, Sabin Vaccine Institute/Chair, GAVI Alliance Independent Review Committee (IRC)
- Hyunjoo Kim, Third Secretary, Development Cooperation Division, Ministry of Foreign Affairs and Trade, Republic of Korea
- Claire Mahon, Special Adviser to Mary Robinson, Board Chair
- Ian McConnell, Director, Vaccine Support Team, Clinton Health Access Initiative
- Bill Roedy, Chief Executive Officer, MTV
- Oliver Sabot, Executive Vice President, Expanded Initiatives, Clinton Health Access Initiative
- Odd-Jostein Saeter, Senior Advisor to Dagfinn Høybråten, Christian Democratic Party Stortinget
- Gina Tambini, Area Manager Family and Community Health Area, Pan American Health Organization

#### GAVI ALLIANCE SECRETARIAT

- Debbie Adams, Managing Director, Legal and Governance
- Geoff Adlide, Director, Advocacy and Public Policy
- Mercy Ahun, Managing Director, Programme Delivery
- Anthony Brown, Senior Legal Counsel
- Santiago Cornejo, Acting Director, Country Reviews and Grant Renewals
- Tony Dutson, Senior Director and Chief Accounting Officer, Finance
- Barry Greene, Managing Director, Finance and Operations
- Jean Gruener, Senior Administrative Assistant, Governance
- Peter Hansen, Director, Monitoring and Evaluation, Policy and Performance
- Jorn Heldrup, Senior Programme Manager, Programme Delivery
- Paul Kelly, Director, Country Programmes, Programme Delivery
- Cees Klumper, Director of Internal Audit
- Doreen Mackay, Executive Assistant to the Chief Executive Officer
- Meegan Murray-Lopez, Executive Officer
- Stephen Nurse-Findlay, Programme Officer, Governance
- Alex Palacios, Director, Special Representative to the U.S.
- Jon Pearman, Director, Accelerated Vaccine Introduction, Policy and Performance
- Carole Presern, Managing Director, Special Projects
- Jason Ray, Head, Information Systems and User Support
- Pierre Richard, IT Manager, Information Technology
- Jeffrey Rowland, Director, Media and Communications, External Relations
- Nina Schwalbe, Managing Director, Policy and Performance
- Paolo Sison, Director, Innovative Finance
- Alexandra Laheurte Sloyka, Administrative Assistant, Governance
- Joelle Tanguy, Managing Director, External Relations
- Dan Thomas, Head, Media and Communications, External Relations
- Daniel Thornton, Senior Adviser to the CEO
- Françoise Welter, Senior Administrative Assistant, Executive Office