

## Gavi Alliance Board Meeting

7-8 December 2016

Sofitel Abidjan Hotel Ivoire, Abidjan, Côte d'Ivoire

### 1. Chair's report

- 1.1 Finding a quorum of members present, the meeting commenced at 09.19 local time on 7 December 2016. Ngozi Okonjo-Iweala, Board Chair, chaired the meeting.
- 1.2 The Chair welcomed new Board members and Alternate Board members, as well as Rob Moodie, Chair of the Evaluation Advisory Committee. She shared regrets from René Karsenti, Chair of the IFFIm Board, who had been unable to attend due to other commitments. She noted that departing members would be recognised for their service at the dinner that evening.
- 1.3 The Board met in closed session on the evening of 6 December and the morning of 7 December to discuss a number of items including potential Gavi engagement in Syria, the Board and Committee self-evaluation and to review the CEO's performance.
- 1.4 Standing declarations of interest were tabled to the Board (Doc 01a in the Board pack). The Chair noted that in the context of the items for decision on the agenda, there were a number of Board members who would have conflicts of interest and that these would be raised at the appropriate time and recorded in the applicable parts of the minutes.
- 1.5 The Board noted its minutes from 22-23 June 2016 (Doc 01b), which were approved by no objection on 22 September 2016. The Board also noted its workplan (Doc 01c) and the Chair encouraged Board members to contribute to the forward plan by raising issues which they may wish to add either with her directly or with the Secretariat. She had solicited inputs to the agenda for this meeting but had only received two responses. It is planned that further work will be done to identify the best process for eliciting input of Board members.
- 1.6 The Chair informed Board members that the Secretariat continues to work on the quality of the Board meeting materials and that the executive summaries for the papers requiring decisions continue to be condensed and are easier to read. Considerable additional material related to the topics on the agenda can be accessed on myGavi for those wishing to receive more comprehensive information.
- 1.7 Finally, the Chair informed Board members that the Executive Committee had only met once since the last Board meeting, on 1 November 2016, to consider a commercially sensitive decision regarding a rotavirus vaccine.

## 2. Consent agenda

- 2.1 The consent agenda included the recommendations of the Governance Committee for Board and Committee member appointments (Doc 02a), IRC nominations (Doc 02b), Changes to Committee Charters (02c) and the Board Travel Policy review (Doc 02d). It also included a Programme Funding Policy update (Doc 02e), the recommendations of the Independent Committee Review (IRC) for a Programme funding request for new vaccine support (Doc 02f) as well as recommendations from the Programme and Policy Committee for a Co-financing waiver (02g) and on the Country Engagement Framework (02h).
- 2.2 An additional recommendation from the Governance Committee in relation to the Board and Committee self-evaluation had been discussed by the Board in closed session on 6 December 2016, and information in relation to the process and the next steps was shared with the Board by Gunilla Carlsson, Acting Governance Committee Chair.

### **Decision One**

The Gavi Alliance Board:

a) **Appointed** the following Board members:

- **Margaret (Peggy) Hamburg** as an Unaffiliated Board Member in the seat formerly held by HRH Infanta Cristina of Spain effective immediately and until 31 December 2019.
- **Daniel Graymore** of the United Kingdom as Board Member representing the United Kingdom on the donor constituency anchored by the United Kingdom effective immediately and until 31 December 2019.
- **Shanelle Hall** as Board member representing UNICEF in the seat previously held by Geeta Rao Gupta effective immediately and until her successor is appointed.
- **Ummy Ally Mwalimu** of Tanzania representing the developing country constituency in the seat previously held by Seif Seleman Rashid of Tanzania effective immediately and until 31 December 2017.
- **Myint Htwe** of Myanmar as Board Member representing the developing country constituency in the seat previously held by Ramjanam Chaudhary of Nepal effective immediately and until 31 December 2017.
- **Reina Buijs** of the Netherlands as Board Member representing the Netherlands on the donor constituency anchored by Norway effective 1 January 2017 and until 31 December 2018.
- **Jan Paehler** of the European Commission as Board Member representing the European Commission on the donor constituency anchored by Germany effective 1 January 2017 and until 31 December 2017.

- **Susan Tolton** of Canada as Board Member representing Canada on the donor constituency anchored by Canada effective 1 January 2017 and until 31 December 2018.

b) **Appointed** the following Alternate Board members:

- **Ted Chaiban** as Alternate Board member to Shanelle Hall representing UNICEF in the seat previously held by Shanelle Hall effective immediately and until his successor is appointed.
- **Yifru Berhan Mitke** of Ethiopia as Alternate Board Member representing the developing country constituency in the seat previously held by Kesetebirhan Admasu of Ethiopia effective immediately and until 31 December 2017.
- **Anna Hamrell** of Sweden as Alternate Board Member to Reina Buijs of the Netherlands representing the donor constituency anchored by Norway effective 1 January 2017 until 31 December 2018.
- **Jean-François Pactet** of France as Alternate Board Member to Jan Paehler of the European Commission representing the donor constituency anchored by Germany effective 1 January 2017 until 31 December 2017.
- **Angela Santoni** of Italy as Alternate Board Member to Susan Tolton of Canada, representing the donor constituency anchored by Canada effective 1 January 2017 until 31 December 2017.
- **Lyn Morgan** as Alternate Board Member representing the industrialised vaccine industry constituency in the seat currently held by Laura Laughlin effective 1 January 2017 until 31 July 2017.

c) **Reappointed** the following Alternate Board members:

- **Jason Lane** of the United Kingdom as Alternate Board Member to Daniel Graymore of the United Kingdom, representing the donor constituency anchored by the United Kingdom until 31 December 2019.

d) **Appointed** the following to the Executive Committee effective immediately:

- **Shanelle Hall** (Board Member) until 31 December 2017.
- **Jan Paehler** (Board Member) until 31 December 2017.

e) **Appointed** the following to the Governance Committee:

- **Daniel Graymore** (Board Member) effective immediately and until 31 December 2017.
- **Reina Buijs** (Board Member) effective 1 January 2017 and until 31 December 2017.

- **Susan Tolton** (Board Member) effective 1 January 2017 and until 31 December 2017.
  - **Lyn Morgan** (Alternate Board Member) effective 1 January 2017 and until 31 July 2017.
- f) **Appointed** the following to the Audit and Finance Committee effective immediately:
- **Ted Chaiban** (Alternate Board Member) until 31 December 2017.
  - **Chris Taylor** (Committee Delegate) until 31 December 2017.
- g) **Appointed** the following to the Programme and Policy Committee effective immediately:
- **Ummy Ally Mwalimu** (Board Member) in the seat currently held by Seif Seleman Rashid until 31 December 2017.
  - **Jean-François Pactet** (Alternate Board Member) in the seat currently held by Mariam Diallo until 31 December 2017.
- h) **Reappointed** the following to the Programme and Policy Committee:
- **Jason Lane** (Alternate Board Member) until 31 December 2017.
  - **Lene Lothe** (Committee Delegate) until 31 December 2017.
- i) **Extended the term** and **reappointed** the following as Chair of the Evaluation Advisory Committee:
- **Rob Moodie** until 31 December 2018.
- j) **Appointed** the following to the Evaluation Advisory Committee effective 1 January 2017:
- **Anna Hamrell** (Alternate Board Member) until 31 December 2018.
  - **Nina Schwalbe** (Independent Expert) until 31 December 2019.
  - **Viroj Tangcharoensathien** (Independent Expert) until 31 December 2019.
  - **Wieneke Vullings** (Independent Expert) until 31 December 2019

*Board members who were candidates for these positions, or whose organisations or constituencies provided candidates for these positions, did not participate in voting on these appointments.*

## **Decision Two**

The Gavi Alliance Board:

- a) **Extended** the terms of the IRC members listed in Annex A, Table 1 of Document 02b for a further three-year term from 1 April 2017 until 31 March 2020:
- b) **Ratified** the emergency appointment of seven IRC members by the Chief Executive Officer in concurrence with the Chair of the Programme and Policy Committee (PPC) under Article 5.1.1 of the By-Laws, whose names are listed in Annex A, Table 2 to Doc 02b, for a term effective 14 October 2016 until 31 March 2019;
- c) **Appointed** as new IRC members the individuals listed in Annex A, Table 3 to Doc 02b for terms effective immediately until 31 March 2019.

## **Decision Three**

The Gavi Alliance Board:

- a) **approved** the revised and updated Committee Charter for the Audit and Finance Committee attached as Annex A to Doc 02c; and
- b) **approved** the revised and updated Committee Charter for the Investment Committee attached as Annex B to Doc 02c.

## **Decision Four**

The Gavi Alliance Board:

**Approved** amendments to the Board Travel Policy as outlined in Annex A to Doc 02d.

## **Decision Five**

The Gavi Alliance Board:

**Approved** the amended Gavi Alliance Programme Funding Policy attached as Appendix 1 to Doc 02e.

## **Decision Six**

The Gavi Alliance Board:

### **Programmes**

- a) **Approved** the recommendations of the June 2016 New Proposals IRC for new country vaccine programmes to commence in 2017 and 2018.

### **Budgets**

- b) **Endorsed** a net increase in programme budgets by US\$ 68 million for the period 2017-2020 to implement the IRC recommendation in (a).

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

- c) **Approved** 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.

## **Decision Seven**

The Gavi Alliance Board:

**Found** that exceptional circumstances in South Sudan and Yemen justify the continuation of Gavi support in those countries irrespective of their default status on their 2015 co-financing obligations

## **Decision Eight**

The Gavi Alliance Board:

- a) **Approved** certain adjustments to the existing methods of reviewing and approving new Gavi support to facilitate and inform a learning agenda for an updated review and approval process, including:
- i. offering opportunities for review of new Gavi support on a country-by-country basis and outside of the existing IRC schedule;
  - ii. enabling IRC members and other impartial technical experts with local/regional expertise to serve in the capacity as independent reviewers as long as there is no conflict of interest;
  - iii. leveraging engagement of country stakeholders to provide input and immediately address issues flagged by the reviewers; and
  - iv. consider, for those countries with relatively smaller Gavi investments, the use of existing review mechanisms such as the HLRP (or the subset of IRC members of the HLRP) to provide funding recommendations on new as well as existing Gavi support.

- b) **Noted** the outcome of this process will allow a final design to be presented to the PPC and Board by end 2017.

### **Decision Nine**

The Gavi Alliance Board:

- a) **Agreed** with the recommendations of the Governance Committee in relation to the 2016 Board and Committee self-evaluation that seek to elevate Board discussions as presented to the Board in closed session on 6 December 2016; and
- b) **Noted** the findings relating to committees and **requested** that the Governance Committee analyse these further, bringing options for consideration to the Board retreat in April 2017 with the intention of proposing recommendations to the Board for approval at its June 2017 meeting.

**Post meeting note:** an overview of the conclusions arising from the 2016 Board and Committee self-evaluation can be found on myGavi.

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### **3. 2016-2020 Strategy: Implementation and progress**

- 3.1 Seth Berkley, CEO, started his presentation by reminding Board members of the introduction of the Alliance Accountability Framework as the foundation for the strategy update. He referred to the 2015 Annual Progress Report and the fact that the Alliance had exceeded all of its mission targets during the 2011-2015 strategic period. He reported on the shortfall in vaccine targets, and indicated that challenges remain in relation to the coverage and equity targets.
- 3.2 He presented, for the first time to the Board, the 2016-2020 indicator dashboard, explaining how it will be used to track progress against the strategy. He highlighted some of the targets for this strategic period in relation to vaccine coverage and health systems strengthening. He referred to the usefulness of the grant performance frameworks, and also to the co-financing performance in 2016.
- 3.3 He provided information to the Board in relation to the challenges some countries are facing in relation to transition and highlighted that successful transition and ensuring long-term sustainability remain an important focus for this strategic period.
- 3.4 The CEO reminded Board members that market shaping continues to remain a priority. He provided information on the number of vaccine introductions foreseen during 2016, indicating that this will be off track due to a number of different factors including issues such as supply constraints or country readiness. It is expected that the targeted country assistance (TCA) activities will be on track.
- 3.5 He referred to three new indicators, two of which are still under development, namely related to civil society engagement and institutional capacity.

- 3.6 Finally, he provided information in relation to the framework managing Secretariat performance and which is linked to the Alliance KPIs.

#### *Discussion*

- Board members expressed appreciation for the inclusion of this item at the beginning of the agenda as it provides a useful strategic overview on the work of the Alliance which helps to frame the discussions to take place during the meeting.
- Board members agreed on the importance of sustainability and proposed that this could be a topic for discussion at the Board Retreat in April 2016. The importance of political will and ensuring commitment and engagement at the highest political level in countries was emphasised in this context.
- Board members welcomed the progress in generating data in relation in particular to health systems strengthening, also noting that while it is encouraging to see an increase in Gavi investments in this area, it is important to understand what the leverage is in the context of the overall financing which is available for countries in this space.
- They also applauded the success of market shaping, which will remain an important area going forward, and where it would be useful to have longer-term strategies keeping in mind that there are slow moving processes which need to be anticipated with a lot of forward planning by the vaccine manufacturers. In this context the importance of ensuring that the supply and procurement roadmaps for the different vaccines are finalised was highlighted.
- One Board member expressed concern that in the context of a country-centric approach, TCA is going to partners in the countries and not directly to the Ministries. It was acknowledged that the technical assistance funded by Gavi is done on the basis of country needs expressed by Ministries of Health. However the flow of funds are from the Secretariat to partners directly without flowing through the ministries. This is both a matter of practicality as well as risk management.

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#### **4. CEO's report**

- 4.1 Seth Berkley, CEO, delivered his report to the Board (Doc 04), starting with an overview on Gavi engagement in Côte d'Ivoire which has shown tremendous progress in the light of recent political crises, with some remaining challenges related to equity, data quality and sustainability.
- 4.2 The CEO provided an update in relation to previous Board decisions such as the malaria vaccine pilots, the measles-rubella strategy, the India partnership strategy and the cold chain equipment optimisation platform.
- 4.3 He referred to the ongoing work in relation to risk management and to the top risks which had been identified and which would be further discussed at this meeting.

- He gave the example of Nigeria as a country which is moving in the right direction but where significant challenges remain.
- 4.4 He provided information to the Board on some of the challenges encountered by the Inactivated polio vaccine (IPV) programme which continues to experience delays due to supply shortages.
  - 4.5 The CEO then referred to some of the challenges facing Gavi in the context of a changing global landscape with a number of recent and potential future changes in leadership among key donors and partners, as well as in implementing countries. He welcomed the positive outcome for Gavi of the DFID Multilateral Development Review 2016 and provided information in relation to the intensification of engagement with new and potential new donors.
  - 4.6 He reminded Board members that vaccines have been included in two health targets of the Sustainable Development Goals (SDG) and that two indicators have also been accepted, but which are pending endorsement by the UN Stats Commission in March 2017.
  - 4.7 He referred to the ever increasing global health threats and the growing risk factors such as climate change, population growth, urbanisation and migration, citing the examples of recent Zika and Yellow Fever outbreaks. He also highlighted recent setbacks to polio eradication as well as challenges relating to antimicrobial resistance.
  - 4.8 He presented examples of how the Alliance is working closely together at every level to ensure that it is fit for purpose for this strategic period. He referred to a number of new tools which are being scaled up such as the joint appraisals, grant performance frameworks and programme capacity assessments. He provided information on Bangladesh as an example of the Alliance model in action.
  - 4.9 He gave an example of the workflow which has been put in place to reduce the time taken to process cash disbursements, showed an example of the vaccine coverage dashboard and gave a brief update on the construction of the health campus in Geneva, where it is expected that the Gavi Secretariat will relocate to in 2018.
  - 4.10 Finally, he referred to the important items which were being presented to the Board at this meeting for decision.

### *Discussion*

- Board members commended the quality of the presentation from the CEO and the clarity of the information presented.
- Board members noted that there is a perceived tension between transition and fragility and that this is something which should be further explored and discussed.
- The importance of having good quality data was emphasised and it was noted that as the data gets better it may reflect setbacks in some areas and that is something

that the Alliance will need to be prepared to deal with. It was agreed that there is a need to create a culture where people are comfortable reporting accurate data, even if that data does not show a positive picture. Such data will be particularly important to ensure that the resources to improve coverage and equity are being properly allocated.

- Board members welcomed the progress in relation to the Partners' Engagement Framework, risk assurance and risk management, and acknowledged that all of this work has been done in response to requests from the Board in the past.
- It was suggested that it could already be useful to think about some of the tools that the Alliance might have over the next few years, including the mid-term review, to think about how the Alliance could and should evolve for the next replenishment period.
- Board members suggested that it could be useful for them if a deep dive was done on one or two countries to help them to have a better understanding around how different stakeholders work together and where Gavi fits in.

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## **5. Financial forecast and programme funding envelopes**

- 5.1 David Sidwell, Audit and Finance Committee (AFC) Chair, introduced this item. He confirmed that the AFC had reviewed the financial forecast and funding decisions, and concluded that Gavi had the financial capacity to approve the programme funding envelopes presented under this item, in accordance with the Programme Funding Policy.
- 5.2 He noted that the AFC conducted thorough discussions with the understanding that it was not expected to opine on the programmatic merits of specific programmes, but was rather expected to advise on the financial feasibility of undertaking recommended programmes.
- 5.3 Barry Greene, Managing Director, Finance & Operations presented the updated financial forecast for 2016-2025 and provided an update on the resources and expenditures in 2016 and 2017 (Doc 05).
- 5.4 He also informed the Board that the resources included in the financial forecast took into account the pledges made in Berlin and subsequently. Additionally, it also factored in further contributions expected as donors complete their pledging through 2020 and make the consequent contributions.

### *Discussion*

- Board members thanked the Secretariat for presenting the financial forecast update and the programme funding envelopes. They also appreciated the diligence of the AFC in reviewing the financial information pertaining to the decisions, which were being presented and recommended to the Board for approval.

- In response to a question from Board members regarding the rationale for requesting the Board to approve combining of the 2016 and 2017 budgets, the Secretariat explained that the request did not seek to combine the programme budgets, but only pertained to Secretariat and partners' operating expenses, and that there would not be any increase in the overall amount even after absorbing the AMC fee gap and operational partnership costs.
- While acknowledging that the role of the AFC was not to debate the value for money of various programmatic options available to Gavi, Board members emphasised that there is increasingly a need for foresight into how AFC opines on the funding options. As it stands currently the AFC opines on the availability of funds for given investments which seem to come on a first come first served basis - however, going forward some thought must be put into how the investment options are framed overall from a value for money perspective. The AFC Chair confirmed this sentiment and requested the Gavi Board to help devise an overarching Alliance-wide framework for decision-making from a trade-off perspective.
- The Secretariat provided an update on the potential savings from Gavi Geneva office moving into the Health Campus in 2018, in response to a question from a Board member, noting that while substantial savings are expected from this move the exact amount is not known at this stage The Secretariat also noted that the Gavi offices in Washington D.C. will be moving in 2017 and that this will also generate substantial savings.
- In response to a question about the reason for 10% reduction in forecast of expenditure on vaccines and 30% on cash-based programmes in 2016, the Secretariat explained that the current year spend is expected to be 85% of the originally forecasted amount for the year. There has been a lower than forecast uptake of cash-based programmes as well as some delays arising from the implementation of programme capacity assessments (PCAs). As always large payments are made in the last quarter to UNICEF for vaccine procurement in the following year, and therefore only minor further variance is expected between currently forecast and actual figures at the end of the year.

## **Decision Ten**

The Gavi Alliance Board:

### **2016-2017 budget for the Partners Engagement Framework & Secretariat**

- a) **Agreed** that the budgetary amounts approved by the Board in Decision 12 of the Board Meeting of 2-3 December 2015 for each component of the Gavi Engagement Framework and Budget for Partners and Secretariat for 2016 and separately for 2017, be treated as an overall Budget amount for each component which may be utilised over both years.
- b) **Agreed** that capital expenditure of the Secretariat in excess of the capital expenditure budget can be incurred within the overall amount of the Secretariat Engagement Framework and Capital Expenditure budgets for both years.

- c) **Agreed** that expenditure on Operational Partnerships, which are a new initiative for which no provision was made in the aforementioned Budget for 2016 and 2017 can be incurred within the overall amount of the Secretariat/Partners' Engagement Framework budgets for both years

The Gavi Alliance Board:

### **2017 General Programme Funding Envelope for “unrestricted” countries**

- a) **Approved** a 2017 Programme Funding Envelope for unrestricted countries from which the Secretariat, under the Programme Funding Policy, shall allot funding to programmes until 31 December 2017, to endorse or adjust previously endorsed amounts of programme multi-year budgets for existing programmes and new programmes for an aggregate amount not exceeding US\$ 1,306 million.

(These endorsements would constitute acknowledgement of such budget amounts at the time of allotment but would not constitute a funding approval, decision, obligation or commitment of the Gavi Alliance or its contributors.)

### **Cold Chain Equipment Optimisation Platform Funding Envelope**

- b) **Approved** a CCEOP Funding Envelope for unrestricted countries from which the Secretariat, under the Programme Funding Policy, shall allot funding to programmes until 31 December 2017, to endorse or adjust previously endorsed amounts of programme multi-year budgets for existing programmes and new CCEOP programmes for an aggregate amount not exceeding US\$ 250 million.

(These endorsements would constitute acknowledgement of such budget amounts at the time of allotment but would not constitute a funding approval, decision, obligation or commitment of the Gavi Alliance or its contributors.)

The Gavi Alliance Board in session without the participation of US citizens and residents:

### **2017 General Programme Funding Envelope for “restricted” countries**

- c) **Approved** a 2017 Programme Funding Envelope for restricted countries from which the Secretariat, under the Programme Funding Policy, shall allot funding to programmes until 31 December 2017, to Endorse or adjust previously endorsed amounts of programme multi-year budgets for existing programmes and new programmes for an aggregate amount not exceeding US\$ 20 million.

(These endorsements would constitute acknowledgement of such budget amounts at the time of allotment but would not constitute a funding approval, decision, obligation or commitment of the Gavi Alliance or its contributors.)

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## **6. Partners' Engagement Framework**

- 6.1 Anuradha Gupta, Deputy CEO presented to the Board the progress of the implementation of the Partners' Engagement Framework (PEF) (Doc 06). She explained, for the benefit of the new board members, that PEF was a new way of planning, funding, operationalising and monitoring technical assistance (TA) to countries, by leveraging the on-ground presence and comparative advantage of partners.
- 6.2 She explained that the PEF model was based on four principles namely, country focus; differentiation; transparency; and accountability. As a result of applying these principles there is an improved quality of dialogue with, and an enhanced focus, on countries that are benefiting from Gavi's support.
- 6.3 She also mentioned that under this framework there are now systems in place that provide a complete view of partner-wide resources, deliverables and performance. Open dialogue between partners and counterparts at the country-level have been observed. A robust Alliance-wide accountability framework has helped provide a defined review mechanism that generates real time information and allows for mid-course corrections based on data. This accountability framework also helps link funding to delivery of services by partners and in-country counterparts.
- 6.4 She provided an overview of progress made on the targeted country assistance (TCA) milestones, and show-cased it through country examples from Timor-Leste and Indonesia.
- 6.5 She concluded by mentioning that to maintain the momentum it will be important for countries to take advantage of the leadership opportunities presented by the PEF approach; and also emphasised the need for the Alliance to take a shared approach.

### *Discussion*

- Board members appreciated the progress made by the Secretariat on the PEF, and lauded the country examples as evidence of the new model working well. They commended the work of partners like WHO, UNICEF and the World Bank on completing a difficult but important and successful process to arrive at the PEF model. They said as an internal accountability framework, PEF could serve as an example to other organisations and could be applied by them.
- Board members recognised the importance of the PEF for its ability to bring institutional assets of partners together for delivery to support governments in immunising children, in different country contexts. They particularly appreciated the collaboration and transparency that could help mitigate the sustainability risk in these countries.
- In response to a question from a Board member, the Secretariat indicated that the process of having the PEF endorsed by all partners took time and effort. Some challenges still exist in countries where partners have faced problems with recruitment. The role of the regional offices in some cases is still unclear, however

as this is the first year of PEF, the Secretariat hoped to get answers to some of these challenges as data from countries starts coming in.

- Board members emphasised that the joint appraisals (JAs) are an important aspect of Gavi's feedback loop and it is imperative that the countries continue to be viewed as the main conveners and authors of the JAs.
- They also emphasised the importance of ensuring that the partners stay engaged, exchange timely and accurate information, and continue to build trust at all levels while staying open to resolving any conflicts that come up as a matter of course. The focus should be on actions taken as a result of enhanced data and reporting.
- Board members asked if the PEF could help address the issue of country capacity for countries that are preparing to transition out of Gavi support. The Secretariat noted that the new framework intends to transfer skills to the countries, to build the country-owned capacity, and this is being monitored closely. They mentioned that TA would need to continue after countries transition out of Gavi, if sustainability is to be achieved in these countries.
- In response to a question regarding the budgeting for the recruitment process for in-country staff, that is ongoing, the Secretariat responded that the MoUs signed with partners stipulate a 75% release of the budget as the first instalment, and the remainder would be disbursed as progress is made on implementing the PEF activities.

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## 7. Country Programmes: strategic issues

### *Country Presentation - Cote d'Ivoire*

- 7.1 Her Excellency, Raymonde Goudou Coffie, Minister of Health and Public Hygiene, Côte d'Ivoire, presented the status, progress and outlook for the country's Expanded Programme on Immunization (EPI).
- 7.2 She mentioned that collaboration with Gavi started in 2000 with support for introducing new vaccines namely pentavalent, hepatitis B, HiB in routine immunisation, as well as support for immunisation services like procuring refrigerators and vehicles, in addition to training and supervising health personnel. In 2007, this support was expanded to include health systems strengthening (HSS) support as well.
- 7.3 She appreciated the support received from Gavi and particularly emphasised that in the post-conflict era Gavi's continued and increasing support allowed the country to identify the post-conflict needs and address these together with Gavi.
- 7.4 She informed the Board that through the combined efforts by the government and Gavi's support over the last 16 years, Cote d'Ivoire has been able to eliminate maternal and neonatal tetanus in 2013; receive a polio-free status in 2015 by the

Regional Poliomyelitis Certification Committee; and has observed a reduction in epidemic outbreaks of measles in particular among other diseases.

- 7.5 She reiterated the commitment of the President and the government towards achieving perfect national vaccination coverage, and outlined some of the measures taken by the government towards this goal. The country hoped to introduce new vaccines for rotavirus, measles rubella and MenA.
- 7.6 She outlined that the government is expected to transition from Gavi's support by 2020 and in order to prepare for this, the government is gradually increasing its contribution to funding for immunisation, and has decided to advance the payment of vaccines starting in 2017.
- 7.7 Finally, she introduced Professor Daniel Ekra, EPI manager, to the Board and thanked him for his important role in the success of the programme.

### *Discussion*

- Board members lauded the advancements made by Côte d'Ivoire under the leadership of the Minister and appreciated her personal commitment and her efforts that entailed going into the field and being a proponent of immunisation in the country.
- In response to a question by a Board member on the availability of skilled people in the health sector, the Minister described the health care system in Côte d'Ivoire. She noted that it was a challenge to ensure equitable spread of health workers, especially in the rural areas, as most health workers are concentrated in and around Abidjan. She also mentioned that it took some effort to secure the budget for strengthening health-worker capacity.
- She mentioned when asked about HPV introduction in the country, that some HPV immunisation has already taken place however in some areas due to cultural resistance it has not been able to be scaled-up. She emphasised that breaking taboos takes time, education and effort.
- As a way forward for Côte d'Ivoire she said that the President is committed to Universal Health Coverage, which got delayed due to the political crises. As health costs are a big chunk of the household budget, there is a focus on making it affordable for all. Once the country transitions from Gavi's support in 2020, it will look to Gavi's support in securing preferential pricing for vaccines.

### *Country Programmes: Strategic issues and Cold Chain Equipment Optimisation Platform (CCEOP)*

- 7.8 Hind Khatib-Othman, Managing Director, Country Programmes, presented strategic issues relevant to Gavi's Country Programme (Doc 07a). She also presented information relating to the high demand for Gavi's newly established CCEOP (Doc 07b).

- 7.9 She provided key highlights from the Alliance's in-country work since the last update to the Board. In addition, she also presented the overview of how the Alliance's investments, technical support, grant and risk management come together to help achieve goals around coverage and equity, sustainability and risk management in countries. She provided country examples from Côte d'Ivoire and Kenya.
- 7.10 She apprised the Board of the co-financing contribution of many countries being on time, however she noted that for some countries, the challenges are complex and persistent that require co-financing waivers in the wake of economic crises or fragility.
- 7.11 She updated the Board on the high demand from countries applying for Gavi's support on CCEOP, with 12 countries already approved or recommended for approval as of Q4 2016, 3 countries under review and another 20-25 countries projected in 2017.

### *Discussion*

- Board members sought to better understand the extent to which a lack of in-country capacity (e.g. lack of human resources, management and technical skills) posed a risk to the success of Gavi's programmes. The Board also wanted to understand what role Gavi's country programmes might play to mitigate this risk in transitioning countries. The Secretariat informed the Board that it had significantly strengthened its programmatic and financial risk management approach, allowing it to detect risks early on through e.g. Programme Capacity Assessments. The Secretariat also informed the Board that it was closely working with Alliance and extended partners to address in-country capacity gaps, for example through targeted country assistance under the PEF.
- Board members encouraged the Secretariat to ensure that continuous learning takes place, and recommended that it take advantage of the knowledge of the Evaluation Advisory Committee when applicable.
- In response to a query about whether CCEOP could benefit other areas requiring cold storage in countries, the Secretariat said that there was EPI guidance that the cold chain will be used only for vaccines.

### **Decision Eleven**

The Gavi Alliance Board:

a) **Noted** that:

i. In June 2015 it

- a) **Approved** the creation of an innovative mechanism to strengthen country cold chain systems and advance the Alliance's Supply Chain Strategy and, ultimately, its coverage and equity goals (the "CCE platform"), the design of

which is set out in Section 3 of Doc 15 to the PPC and includes a funding model tiered by country GNI level;

- b) **Noted** that an amount of US\$ 50 million (to be reassessed and potentially increased based on initial applications to the CCE platform) will be allocated from the resources pledged for 2016-2020 (which envisage funding for strategic initiatives to realise Gavi's new strategy) to launch the implementation of the CCE platform and fund the initial applications in 2016-2017 and **requested** the Secretariat to report back to the PPC and to the Board in 2017 on the implementation of the CCE platform;
- ii. At that time, the Secretariat noted that the proposed initial investment of US\$ 50 million by Gavi is to launch the platform. The total estimated funding for the platform required for Gavi countries, excluding India, was estimated to be between US\$ 240 million and US\$ 310 million for five years;
- iii. Following the approval of the CCE platform and its subsequent launch, demand for support under the platform has exceeded initial expectations foreseen in the 2015 CCE platform Board decision;
- iv. Additional funding is now required for 20 countries that have applied in 2016 for an amount of approximately US\$ 150 million; and
- v. Additional applications are expected to be received before the first Board meeting in June 2017.
- b) **Decided** that:
- i. Consistent with the 2015 Board decision, a review of progress and lessons learned of the CCE platform should be presented to the PPC at its meeting in May 2017 and the Board in June 2017, including its links with HSIS, anticipated impact on the market and the quality of the overall immunisation systems, country case studies, an updated demand forecast, and taking into account feedback provided by the IRC on applications reviewed;
- ii. Based on that review, the Secretariat will present to the PPC and Board future options for the implementation of the CCEOP; and
- iii. In the period up to the Board meeting in June 2017, the total multi-year commitments of grants for CCEOP should not exceed US\$ 250 million, requesting the Secretariat to develop strategies for equitable allocation of the funds available.

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## **8. Fragile settings, emergencies and displaced people**

- 8.1 Richard Sezibera, Programme and Policy Committee (PPC) Chair, introduced this item by reminding Board members that this review of Gavi's fragility and

immunisation policy had been undertaken in a very short timeframe, due to the Board's request at the retreat in April to have it on the agenda for this meeting.

- 8.2 He noted that the PPC had suggested a separation of the topics into three: fragility, emergencies, and displaced people, and that based on this suggestion, the Secretariat had structured the Board paper as such.
- 8.3 He informed Board members that the PPC had supported the proposed approach to fragility, noting that Gavi's investment in fragile settings should have a long-term systems strengthening perspective. PPC members had also supported the proposed approach to emergencies and situations involving refugees and displaced persons, and highlighted the importance of ensuring rapidity of response, working with the other key actors in this area, and the fact that Gavi would not replace funding by other organisations.
- 8.4 He informed the Board that the majority of PPC members had felt that Gavi should not engage in non-Gavi countries experiencing a WHO grade 3 health emergency as it would go beyond Gavi's Eligibility and Transition Policy. Finally, he referred to the discussion that the PPC had in relation to potential engagement in Syria, which had also been discussed by the Board in closed session the prior evening;
- 8.5 Judith Kallenberg, Head, Policy, presented information to the Board on the proposed approach in fragile settings, emergencies and situations involving displaced people (Doc 08). She highlighted that the current policy needs to be looked at in the board context of Gavi's country engagement model which has evolved significantly, and outlined the principles for the new policy, as discussed and recommended by the PPC.

### *Discussion*

- Board members indicated their support for the principles. They noted that following approval of the recommendation the Secretariat will already commence operationalising the new principles, which will also come back to the PPC and the Board for approval in the form of a new policy in May and June 2017 respectively.
- Whilst acknowledging the important role that CSOs can play in fragile and emergency environments, it was agreed that whenever possible Gavi should work directly with national governments and should this not be possible, direct engagement with CSOs should be considered in full disclosure to the government.
- Board members highlighted the importance of ensuring that Gavi's approach in the context of this policy should complement and be coordinated with the work of other actors. In this context it was suggested that it would be useful at the next Board meeting, to have a pre-Board technical briefing session whereby relevant stakeholders come together to present the work that each of them are doing in such settings, so as to better understand Gavi's comparative advantage in this space.

- Board members reflected on the proposed wording of the decision in relation to potential engagement with Syria, in line with the discussion during their closed session on the previous evening.
- Board members noted the proposal that support is provided for the procurement of vaccines and cold chain equipment, and that it is considered for the moment that the funding would come from the approved programme funding envelope. They further noted that this support is not for operational costs..

### **Decision Twelve**

The Gavi Alliance Board:

**Approved** the principles for Gavi's approach to classifying and responding to fragile and emergency settings and situations involving displaced people as embodied in sections 4.5, 5.3, and 6.4 in Doc 08a to the Board, and **requested** the Secretariat to operationalise these principles into a policy which will replace the 2013 Fragility and Immunisation Policy.

### **Decision Thirteen**

The Gavi Alliance Board:

a) **Noted** that:

1. WHO has classified Syria as a grade 3 humanitarian emergency for the last three years;
2. for the same period, the World Bank has classified Syria as a Lower-Middle-Income Country and projects it is likely to become IDA-eligible;
3. no GNI per capita estimate has been available for Syria for several years and the last available estimate was US\$ 1,860 in 2007;
4. providing support to immunisation in Syria would require working through partners;
5. Gavi investment in Syria would involve a higher risk tolerance;

b) **Approved**, in order to support immunisation of children in Syria, an annual amount of up to US\$ 25 million for 2017 and 2018 for the purpose of procuring Gavi vaccines and cold chain equipment through UNICEF to be allocated from the approved programme funding envelope;

c) **Requested that:**

1. such support shall be aligned with the annual Syria Humanitarian Response Plan;
2. UNICEF, in consultation with WHO and CSO implementing partners, develop a detailed proposal including reporting arrangements and taking into account the principle of equitable access and following the 'whole of Syria'-approach;
3. the PPC and Board be presented with regular updates on implementation;
4. this decision be reviewed at the latest at the December 2018 Board meeting to explore further the most efficient ways to support Syrian children.

## **9. Chair's reflections on the day**

- 9.1 The Chair provided some reflections on the Board's deliberations during the first day of its meeting.

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## **10. Chair's overview**

- 10.1 The Chair reflected briefly on the previous day's discussions, highlighting that some critical decisions were approved by the Board the previous day. She noted that the high quality work put in by the Secretariat and the relevant Board Committees in presenting these decisions for the Board's approval, resulted in a smooth approval process.
- 10.2 She proposed that the next Board retreat take place in Washington DC, in April 2017, to which Board members agreed. The Chair sought views of Board members on the possible areas to cover during the retreat. A number of ideas presented by Board members included discussion sessions on transition and sustainability, data and Gavi's role in developing country management capacity for immunisation.
- 10.3 The Chair encouraged Board members to discuss at the retreat how the field of health may evolve in the next decade and see how Gavi is placed to react to such changes. It was agreed that an agenda for the retreat would be prepared and shared with Board members, and that as requested by Board members, any breakout sessions will be kept to a minimum.

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## **11. Risk management update**

- 11.1 David Sidwell, AFC Chair, introduced this item to the Board. He explained that since 2014 the Board has encouraged the organisation to not only identify the critical risks that face Gavi in achievement of its strategy, but also put in place adequate processes at each of the three lines of defence, through risk mapping, internal controls and attribution of risk ownership.
- 11.2 He said that much progress has been made in the internal audit and investigations area, as well as the risk management space. The Risk and Assurance report being presented for approval benefits from the review of AFC and PPC, after the initial discussion with the Board in April 2016. He emphasised that risk identification and management is a field that is never static, and is dependent on many internal and external variables, therefore the Board should expect regular refinement to the Risk report going forward.
- 11.3 He concluded the introduction by informing the Board that the Risk and Assurance report would be presented to the Board on an annual basis, and the presentation of the risks, and relevant mitigation strategies will continue to get refined based on new information flows and feedback.

- 11.4 Jacob van der Blij, Head of Risk, presented Gavi's first Risk and Assurance report to the Board, focusing on the top risks for the Alliance that were ranked against likelihood and impact (Doc 11). He provided an overview of the interdependencies between risks.
- 11.5 He informed the Board that based on a recent informal benchmarking among peer organisations, Gavi's risk framework is relatively comprehensive. With the basic building blocks of the risk framework now in place, these need to be institutionalised as a management tool to help manage the agreed top risks through appropriate monitoring and mitigation strategies. Alex de Jonquieres, Chief of Staff, provided country examples to demonstrate the risk framework's application and utilisation.

### *Discussion*

- The Board members appreciated the Risk and Assurance report and congratulated the Secretariat on producing a comprehensive list of top risks facing the Alliance, noting that the next step would be to further develop corresponding mitigation strategies with clear accountabilities and allocation of risk ownership. Board members advised that in order to put effective risk mitigation strategies in place, some broad risks will need to be broken down.
- A Board member emphasised the importance of developing a culture at the Board where presenting accurate data - even when not favourable - is not viewed as a risk by countries or other stakeholders; and a need for putting the correct incentives in place for data accuracy and honesty. They also focused on the need to communicate these risks effectively to relevant stakeholders.
- A Board member requested that foreign exchange risk be included on the risk register. He acknowledged that this was being managed well by the finance team, however as this is a key risk, it should be part of the list. Other risks recommended to be included were 'country ownership and political will' - the absence of which could jeopardise implementation of Gavi's support in countries.
- Board members discussed the growing proportion of the Gavi-eligible countries that are recognised as fragile states/situations and that this would increasingly impact on risk and mitigation, particularly as it relates to transition and achieving the coverage and equity goals.
- Board members agreed that the Gavi risk appetite statement would need to be updated and noted that this is due to be discussed by the Board in June 2017. A Board member noted risks regarding transition were approaching the edge of their comfort zone, and welcomed the opportunity to address this during the April Board Retreat. This related to situations where countries might transition without having met the strategic goals and to situations where countries that have transitioned may be unable to sustain the levels of coverage and equity achieved previously through Gavi support. One Board member also suggested that the Risk and Assurance report be presented immediately after the CEO's strategy and CEO presentation, at future Board meetings.

- A Board member commented about the need to include both endogenous and exogenous risks in the report, so that even if there is a risk that Gavi cannot manage or mitigate, there could be plans devised to minimise Gavi's exposure should the risk manifest.
- The Secretariat confirmed to the Board that it will focus on having risk mitigation strategies in place as a next step, and will continue to refine the analysis and definition of individual risks. They also confirmed that these risk mitigation strategies will attribute responsibilities at board level, at partner level, at country level and within the Secretariat, building on the Risk & Assurance report.

### **Decision Fourteen**

The Gavi Alliance Board:

**Approved** the Risk & Assurance Report attached as Appendix 1 to Doc 11.

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### **12. Review of Gavi support for HPV vaccine**

- 12.1 Richard Sezibera, Programme and Policy Committee (PPC) Chair, introduced this item by emphasising the importance of HPV vaccine. He stated that according to projections, deaths due to cervical cancer are soon expected to overtake deaths due to childbirth. While 85% of the disease burden is in developing countries, 70% of the disease is vaccine-preventable, and therefore Gavi's support for HPV vaccine is a strategic decision and good investment in the future.
- 12.2 He also informed the Board that while Gavi achieved its 2015 HPV targets, there are lessons learned and mid-course corrections are required to ensure achievement of the 2020 targets, which include coverage of multi-age cohorts and communication of the cost-benefit of routinising this vaccine in Gavi eligible countries.
- 12.3 Michael F Thomas, Director of Vaccine Implementation, reviewed Gavi's support for HPV vaccine. He informed the Board that through Gavi's support 23 countries implemented HPV demos, while three opted for national programmes (Doc 12). He noted however that not many countries who opted for demo programmes are transitioning to national programmes. Out of the twelve countries that completed the demo project, only two have requested national introduction of HPV vaccine.
- 12.4 He proposed two strategic shifts for the Board's consideration, which would enable Gavi achieve and exceed its target of reaching 30 million girls by 2020. These strategic shifts include: 1) direct national introduction with the option of a phased rollout, and 2) multi-age cohort vaccination in the year of introduction. This will also require enhanced leadership and technical assistance by partners.

## *Discussion*

- Board members endorsed Gavi's support for HPV vaccine introduction in countries and were appreciative of the efforts being made to reach girls in developing countries through this vaccination and preventing cervical cancer.
- The Board Chair emphasised that two-dose administration of the vaccine, which started in developing countries, and is now becoming an international norm, allows developing countries to demonstrate leadership.
- Board members underscored the importance of communicating relevant information and data to countries regarding the cost of running a national programme for immunisation against HPV. The negative feedback on social media and incorrect attribution associated with the vaccine was mentioned as one of the causes of low up-take by countries.
- Board members with technical expertise on the subject reaffirmed the safety of the vaccine, and said that this needs to be actively communicated. They pointed out that global leadership was necessary to help drive this agenda and all partners at the global or regional levels have a role to play.
- While focusing on sustainability and making HPV vaccination part of routine immunisation, Board members felt that service integration opportunities, including with the education sector, should be explored. The Alternate Board member representing the Norway, Netherlands and Sweden constituency offered, on behalf of her constituency, to host a consultation meeting among different partners, CSOs, in-country service providers that could play a role in reaching the target population for HPV immunisation through different channels.
- The increasing need for platforms to reach adolescent girls was discussed. Board members noted that such platforms should be developed based on the country context. Alliance partners, local CSOs, Ministries of Education or paediatricians should be involved as part of the vaccine delivery and administration model, for example.
- The Secretariat informed the Board that the PEF platform was being leveraged to trickle data and learning to the country level. Other partnerships, like that with the Girl Effect, will help Gavi see the drivers behind acceptance of HPV vaccine in countries.
- In response to the Board members question about whether transitioning countries would be able to amend their applications for additional birth cohorts, the Secretariat said that it could be done, if the Board provided approval for doing so. It was agreed that the Secretariat would bring the relevant data and information to the Board, on what it would mean to allow transitioning countries to apply for the multi-cohort approach.
- Board members agreed that there are many variables on the demand curve, and therefore close alignment with the industry was necessary to be able to forecast the demand as accurately as possible.

## **Decision Fifteen**

The Gavi Alliance Board:

- a) **Approved** that for the HPV vaccine countries can apply:
- i. directly for national introduction, while maintaining the option of implementing a phased national introduction;
  - ii. for support for multi-age cohort HPV vaccinations (9-14 years of age) in year one of introduction of the vaccine, including support for 100% of vaccine costs for the additional cohorts, and operational support of up to US\$ 0.65 per targeted girl of those cohorts.
- b) **Noted** that the additional funding associated with the above approval for the period 2016-2020 is expected to be approximately US\$ 72 million.

*David Loew (IFPMA) recused himself and did not vote on Decision Fifteen above.*

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### **13. Gavi's support for emergency vaccine stockpiles**

- 13.1 Richard Sezibera, Programme and Policy Committee (PPC) Chair, introduced this item noting that the PPC had already discussed this issue at its meeting in May 2016, and had noted the urgent need for a comprehensive International Coordinating Group (ICG) review for all Gavi-supported stockpiles and in particular requested the Secretariat to investigate mechanisms for vaccine forecasts and procurement as well as long-term strategic decision-making to ensure that they are optimised.
- 13.2 At its October 2016 meeting, PPC members had expressed support for the proposed approach and principles and appreciation for the focus on a comprehensive disease control strategy of which outbreak response is an important component. They had had a robust discussion about the transparency of the ICG and the need for Gavi to have clarity around the processes to ensure that Gavi investments are safeguarded and that the Alliance objectives in this area are also achieved.
- 13.3 Wilson Mok, Strategy Specialist, Policy & Market Shaping, presented information to the Board on the proposed principles for future Gavi support for emergency vaccine stockpiles (Doc 13), giving an overview of current engagement, information in relation to the three areas for enhancement as well as the financial implications.

#### *Discussion*

- Board members indicated their support for the proposed approach and principles, highlighting the importance of Gavi's engagement remaining part of a comprehensive disease control strategy, with a primary focus on strengthening routine immunisation.

- It was noted that for each of the vaccines there cannot be a 'one size fits all' approach to either the stockpiles or the routinisation, also in the context of vaccine supply, and that it is important to keep this in mind.
- A Board member proposed amending the first bullet in Figure 1, Accountability, to read "*Transparent criteria and assessment framework for allocating doses; the Gavi Secretariat to observe ICG decision process on allocating doses to countries and participate in strategic decisions on epidemic response*" and amended the decision language accordingly, and this was agreed by the Board.
- Jean-Marie Okwo-Bele, speaking on behalf of the ICG, comprised of WHO, UNICEF, Médecins Sans Frontières (MSF) and the International Federation of Red Cross and Red Crescent Societies (IFRC), indicated that the ICG acknowledged that communication in relation to their decision-making processes can be improved. However, in order to ensure that the confidentiality of their deliberations are maintained using the Chatham House Rules which are a core principle of the ICG, two of the four ICG members, namely MSF and IFRC, were not in favour of the Gavi Secretariat being an observer and preferred this be considered as part of an evaluation of the entire ICG mechanism. An alternative process was proposed whereby the Gavi Secretariat would be informed promptly once decisions are made by the ICG.
- Board members were somewhat perplexed by this information, in particular as all ICG members are Alliance partners, and the ICG-managed stockpiles are fully funded by Gavi. Concerns were expressed in relation to the levels of funding being provided by Gavi and the fact that there is resistance to ensuring adequate levels of transparency and accountability in relation to the investments being made. It was noted that as an observer, the Secretariat would not be able to partake in the discussions, unless invited to do so, and that if necessary it would be possible to sign a confidentiality agreement so as to respect the confidentiality of the ICG discussions and deliberations. Some Board members raised questions about the added value of another ICG evaluation and its ability to resolve this matter.
- The Board member representing UNICEF confirmed that UNICEF, as a member of the ICG, has no objections to the proposal that the Secretariat be an observer to the ICG, and indeed reminded Board members that UNICEF has greatly benefited from the Secretariat participation in the deliberations of their Procurement Reference Groups, which were established following a request to ensure transparency in their decision-making processes.
- Following discussion, Board members confirmed their decision to request that the Gavi Secretariat observe ICG decision processes and participate in strategic decisions on epidemic response, and asked Dr Okwo-Bele to convey promptly this to the ICG for consideration. The Board also requested ICG members represented at the Gavi Board to raise the issue for discussion at the senior management level of their organisations.

## **Decision Sixteen**

The Gavi Alliance Board:

- a) **Approved** the principles set out in Figure 1 of Doc 13 for Gavi's support for emergency stockpiles of Gavi-supported vaccines as an integral part of integrated disease control strategies, as amended by discussions at the Board, overriding previous Board decisions on Gavi's support for emergency stockpiles; and
- b) **Noted** that additional funding associated with the adoption of the principles for the period 2017-2020 amount to approximately US\$ 86 million for meningitis and cholera.

*Naveen Thacker (CSOs), David Loew (IFPMA), Shanelle Hall (UNICEF) and Jean-Marie Okwo-Bele (WHO) recused themselves and did not vote on Decision Sixteen above.*

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### **14. Gavi's continued role in Yellow Fever control**

- 14.1 Richard Sezibera, Programme and Policy Committee (PPC) Chair, introduced this item noting that the PPC had discussed this issue at its meeting in October 2016, and had noted the identified need to improve coverage of the Yellow Fever vaccine, especially through integration of this vaccine into routine immunisation.
- 14.2 He noted that at the PPC meeting there was consensus to take forward Gavi's support for Yellow Fever vaccine in alignment with WHO's Eliminating Yellow Fever Epidemics (EYE) Strategy.
- 14.3 Michael F Thomas, Director of Vaccine Implementation, presented Gavi's continued role in Yellow Fever control to the Board, in the context of evolving opportunities and threats (Doc 14). He summarised the lessons learned from previous Yellow Fever initiatives, and outlined the supply side improvements expected in Yellow Fever vaccine production.
- 14.4 He presented Gavi's approach to support the implementation of the WHO EYE Strategy, through working with partners to improve governance and oversight, improving sustainable immunisation, and continuing to work with vaccine manufacturers to realise supply increases.

#### *Discussion*

- Board members appreciated the work by the Secretariat and highlighted that strong routine immunisation helps prevent outbreaks and epidemics, as Yellow Fever manifests in susceptible people.
- Board members encouraged the use of modelling and close surveillance in order to be more precise on the allocation of resources for yellow fever immunisation.

- In response to a question, the Secretariat acknowledged that the drop in demand for Yellow Fever vaccination in 2025 seemed significant, however, due to the increased threat of Yellow Fever emerging from changing global climate, population movements and urbanisation, it is possible that the entire demand curve is seen to shift in the next decade. However, this cannot be predicted with accuracy given the long-term horizon, hence the demand for 2025 is extrapolated from the current market context.
- In response to a question by a Board member representing the industry about whether Gavi was considering a buffer stock of the Yellow Fever vaccine, to mitigate against the risk of global vaccine supply disruptions, the Secretariat responded that this is something that would be considered going forward when supply allows.

### **Decision Seventeen**

The Gavi Alliance Board:

- a) **Agreed** that Gavi's support for Yellow Fever vaccine be based on the Eliminating Yellow Fever Epidemics Strategy developed by WHO (the "EYE Strategy").
- b) **Noted** that due to increased supply availability, and the identified need to improve Yellow Fever vaccine coverage in endemic countries, to introduce forecasted expenditure on Yellow Fever vaccine support in Gavi eligible countries in the period 2017-2020 will increase by approximately up to US\$ 150 million.

*David Loew (IFPMA) recused himself and did not vote on Decision Seventeen above.*

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## **15. Committee Chair and IFFIm Board reports**

- 15.1 The Chair introduced this item, underlining the importance of the work of the committees and appreciation for the service of Board members, Alternate Board members and their Committee Delegates on these Committees.

### *Investment Committee*

- 15.1 Stephen Zinser, Investment Committee Chair, delivered the report of the Investment Committee, which had met twice since the June Board meeting, on 2 August 2016 and 1 November 2016 by teleconference. He updated the board on the macro environment and markets, the portfolio and performance review, the key highlights for the second half of 2016 and the key priorities for 2017.
- 15.2 He set his report in the context of global political changes which can quickly invert policy making and create market uncertainty, where there are consequences for fiscal expansion and structural reforms and where inflation, which is modest now, is expected to risk on the back of increased government spending.

- 15.3 He informed Board members that the US and European equity markets had performed well, but that the emerging markets had suffered after the US elections. He indicated that fixed income sovereign bonds typically viewed as safe havens have sustained a volatile unwinding in Q4 and that the volatility of the US\$ has had only a modest impact on Gavi's portfolio.
- 15.4 He reviewed the short-term and long-term investment portfolio objectives as outlined in his written report to the Board, provided a summary of the risk review and information on the returns of Gavi's investment portfolio which has generated an estimated year-to-date net investment income of US\$ 53.9 million.

#### *Evaluation Advisory Committee*

- 15.5 Rob Moodie, Evaluation Advisory Committee (EAC), delivered the report of the EAC, noting that it had met once since the June Board meeting on 4-5 October 2016. He reported that the EAC had received information on the relevant new/revised Gavi policies and frameworks, including the first draft of the Monitoring and Evaluation Framework for the 2016-2020 Strategy, an update on ongoing evaluation activities, on the methodology of the evaluation of technical assistance (TA) provided through the PEF, and had discussed the proposed principles and evaluation approach for Gavi 2016-2020.
- 15.6 He informed Board members that the EAC had discussed the future of the Full Country Evaluations (FCE) project and that based on the discussion, and on an assessment of the proposed principles, had agreed on a two year continuation of the project with targeted approaches by country for Mozambique, Zambia and Uganda. In the context of this project, the EAC had agreed that collaboration with the Global Fund be explored. Going forward the EAC will be considering and approval the terms of reference for the second phase of the FCE project and considering options in relation to the contractual arrangements going forward.

#### *IFFIm*

- 15.7 Christopher Egerton-Warburton, IFFIm Board member, delivered a report of the activities of the IFFIm Company on behalf of the IFFIm Board Chair, Rene Karsenti.
- 15.8 He recalled that IFFIm was created exactly ten years ago and noted the interest expressed by Gavi Board members in finding a way to capture the history of IFFIm, including information relating to the large number of people who played a key role in bringing together a number of stakeholders who were not necessarily aligned at that time on the need for such an instrument.
- 15.9 He provided information relating to the funding that IFFIm has provided for Gavi over the past ten years, and that it expects to provide an additional US\$ 1.3 billion for Gavi during this strategic period. He referred to a recent bond issuance on the international US\$ benchmark market, the first since 2013, which had been oversubscribed and closed with orders of over US\$ 500 million.

15.10 He referred to IFFIm continued strategic role and the interest from other sectors seeking guidance on replicating the IFFIm model. In this context he noted that despite a request to IFFIm from one donor to use the IFFIm mechanism to support the Coalition for Epidemic Preparedness Innovations (CEPI), discussions with IFFIm donors had shown that there is not consensus to use the IFFIm structure to facilitate donor support to the initiative and that it may unfortunately necessitate looking at the possibility of setting up a new innovative financing structure for CEPI. This prompted a discussion about using IFFIm for other purposes and the risks of saying no to those interested in exploring the opportunity.

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## **16. Review of decisions**

16.1 Philip Armstrong, Director of Governance and Secretary to the Board, reviewed and agreed the decisions with the Board.

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## **17. Closing remarks and any other business**

17.1 The Chair thanked the Secretariat and Board Members for the high quality of their work and interventions during the meeting.

17.2 She expressed her thanks to His Excellency President Ouattara for hosting the meeting.

17.3 She thanked Madame la Ministre Raymonde Goudou Coffie for her dedication, in particular in light of her recent bereavement, and also to her team for their extraordinary welcome and their commitment to ensuring the success of the meeting and related events.

17.3 After determining there was no further business, the meeting was brought to a close.

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**Dr Ngozi Okonjo-Iweala**  
Chair of the Board

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**Mr Philip Armstrong**  
Secretary to the Board

## Attachment B

### Participants

#### Board members

- Ngozi Okonjo-Iweala, Chair
- Edna Yolani Batres (Day One)
- Gunilla Carlsson
- Tim Evans
- Daniel Graymore
- Raymonde Goudou Coffie
- Shanelle Hall
- Eivind Homme
- Ingrid-Gabriela Hoven
- Irene Koek
- Orin Levine
- David Loew
- Yifru Berhan Mitke (Alternate)
- Jean-Marie Okwo-Bele (Alternate)
- Angela Santoni
- Helen Rees
- William Roedy
- Richard Sezibera
- David Sidwell
- Samba Sow
- Bounkong Syhavong (Alternate)
- Naveen Thacker
- Stephen Zinser
- Seth Berkley (**non-voting**)

#### Alternates Observing

- Blair Exell
- Bradford Gessner
- Javier Hernández Peña
- Rama Lakshminarayanan
- Jason Lane
- Laura Laughlin
- Clarisse Loe Loumou
- Violaine Mitchell
- Jan Paehler
- Wieneke Vullings

#### Board Members Elect

- Reina Buijs

#### Alternate Board Members Elect

- Anna Hamrell
- Lyn Morgan-Marsden
- Jean-Francois Pactet

#### Regrets

- Flavia Bustreo, Vice Chair
- Bahar Idriss Abu Garda
- Kesetebirhan Admasu (Alternate)
- Juliman Fuad (Alternate)
- Felix Kabange (Alternate)
- Sergey Khachatryan (Alternate)
- Yifei Li
- Adar Poonawalla
- Muhammad Ayub Sheikh (Alternate)

### Additional Attendees

#### EVALUATION ADVISORY COMMITTEE

Dr Rob Moodie, Professor of Public Health, University of Malawi and Chair, Evaluation Advisory Committee

#### IFFIm

Ms Fatimatou Diop, Vice President, AFRIVAC

Mr Christopher (Edge) Egerton-Warburton, Co-founder, Lion's Head Global Partners

Mr Marcus Fedder, Co-Founder and Managing Partner, Agora Microfinance Partners LLP

#### BILL AND MELINDA GATES FOUNDATION

Ms Julie Bernstein, Deputy Director, Program Advocacy and Communications

Ms Tasleem Kachra, Senior Program Officer. Vaccine Delivery

### **UNICEF**

Dr Robin Nandy, Principal Advisor & Chief of Immunizations, New York  
Dr Benjamin Schreiber, Senior Health Specialist, Strategy and Management, New York  
Dr Suvi Rautio, Deputy Director, UNICEF Supply Division  
Dr Heather Deehan, Chief, Vaccine Centre, UNICEF Supply Division

### **DEVELOPING COUNTRY GOVERNMENTS**

#### **Côte d'Ivoire**

Prof. Simplicie Dagnan, Director General, Health and Public Hygiene, Ministry of Health, Côte d'Ivoire  
Prof. Daniel Ekra, EPI Coordinator, Ministry of Health, Cote d'Ivoire  
Prof. Joseph vroh Benie Bi, Director, National Institute of Public Hygiene, Ministry of Health, Côte d'Ivoire

#### **Laos PDR**

Dr Anonh Xeuatvongsa, Deputy Director, MCH and EPI Manager, Ministry of Health, Laos PDR  
Dr Bounseuth Keopasith, Personal Assistant to the Minister of Health, Laos PDR

### **DONOR GOVERNMENTS**

#### **Australia**

Ms Lucy Phillips, Assistant Director, Health and Education Funds, Department of Foreign Affairs and Trade  
Ms Sue Elliott, Development Counsellor (Health), Permanent Mission to the UN, Geneva

#### **Canada**

Ms Sara Nicholls, Deputy Director, Immunization and Child Health

#### **European Commission**

Mr Mathias Reinicke, Policy Officer, DG DEVCO, European Commission

#### **France**

Mr Benjamin Bechaz, Policy Advisor, Ministry of Foreign Affairs  
Ms Saran Branchi, Conseillère Régionale Santé Mondiale, Ambassade de France, Abidjan

#### **Germany**

Mr Marcus Koll, Senior Policy Officer, BMZ  
Mr Wolfgang Bichmann, Global Health Advisor, KfW Development Bank, Advisor to BMZ Germany  
Mr Tobias Luppe, Advisor, GIZ

#### **Japan**

Mr Eriko Jibiki, Official, Ministry of Foreign Affairs

#### **Italy**

Ms Francesca Manno, Director, Ministry of Economy and Finance  
Mr Diego Cimino, Second Secretary, Ministry of Foreign Affairs and International Cooperation

#### **Kingdom of Saudi Arabia**

Dr Birna Abdosh Ahmed, Senior Health Specialist, Health Division Focal Point for the Live and Livelihood Fund, Islamic Development Bank Group, Jeddah  
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