GAVI Business Plan Deliverables

Strategic objective	PO	Programme objective	Interim deliverable (2013)	Interim deliverable (2014)	Programme deliverables (2015)
1.1. Increase evidence based decision-making by countries	1.1.1	Improve country **decision-making structures, systems and processes**	By end of 2013: i) 30 GAVI supported countries have functional NITAGs ii) 13 GAVI supported countries have functional NRAs iii) NITAGs and ICCs have the relevant evidence prior to deciding national introduction of vaccines (e.g. HPV)	By end of 2014: i) 40 GAVI supported countries have functional NITAGs ii) 16 GAVI supported countries have functional NRAs iii) NITAGs and ICCs have the relevant evidence prior to deciding national introduction of vaccines (e.g. HPV)	i) 50 GAVI supported countries have National Immunisation Technical Advisory Groups (NITAG) meeting 6 basic process indicators ii) 18 GAVI supported countries have functional National Regulatory Authorities (NRAs) iii) NITAGs and ICC have the relevant evidence prior to deciding national introduction of vaccines (e.g. HPV)
1.2. Strengthen country introduction to help meet demand	1.2.1	Improve the **quality of country planning, GAVI applications and performance reporting**	75% of applications submitted to GAVI are approved by the IRC by end of 2013	i) 78% of applications submitted to GAVI are approved by the IRC ii) 30% of countries that submit an application by 2014, and which previously submitted an application in 2010-11 do so without externally funded technical assistance	i) 80% of applications submitted to GAVI approved by the IRC ii) 90% of countries approved for GAVI vaccine support are ready to introduce the vaccines at times proposed in their application
	1.2.2	Prepare countries for **successful introductions** of new and underused vaccines	i) 70% of countries that introduced new vaccines reached their coverage targets in the first year after introduction by end of 2013 ii) 50 GAVI supported countries have undertaken Effective Vaccine Management (EVM) assessments resulting in improvement initiatives	i) 75% of countries that introduced new vaccines reached their coverage targets in the first year after introduction by end of 2013 ii) 55 countries have undertaken EVM assessments resulting in improvement initiatives by end of 2014	i) 80% of countries that introduced new vaccines reached their coverage targets in the first year after introduction ii) All GAVI supported countries have undertaken Effective Vaccine Management (EVM) assessments and 80% of them are on track in the implementation of their improvement plan
	1.2.4	Strengthen national capacity for planning of **behaviour change communication for new and underused vaccines within a country's disease control framework**	15 priority countries have implemented coordinated communication plans and demonstrated impact on 1-3 priority targeted behaviours	20 priority countries have implemented coordinated communication plans and demonstrated impact on 1-3 priority targeted behaviours	25 priority countries have implemented coordinated communication plans and demonstrated impact on 1-3 priority targeted behaviours
2.1. Contribute to the resolving of the major constraints to delivering immunisation	2.1.1	**Identify and address constraints to safe immunisation and service delivery in countries under 70% DTP3 coverage**	For at least 7 out of the 12* countries that were below 70% coverage in 2010: i) countries, supported by partners, have identified major contraints to immunisation; ii) countries, supported by partners, have developed action plans to address all these constraints; iii) countries, supported by partners, have tailored their GAVI HSS grants to these action plans * Afghanistan, CAR , DR Congo, Chad, ,Haiti, Liberia, Mauritania, Nigeria, PNG, Somalia, Uganda and Yemen	1. For all 12 countries that were below 70% coverage in 2010: i) countries, supported by partners, have identified major contraints to immunisation; ii) countries, by partners, have identified safety issues linked to injection safety and waste management; iii) countries, supported by partners, have developed action plans to address all these constraints; 2. At least 7 countries that were below 70% coverage in 2010 have increased their coverage by minimum 5% from the baseline.	At least 7 out the 12 countries* that were below 70% coverage in 2010 have improved their immunization coverage by minimum 10% from the baseline. * Afghanistan, CAR , DR Congo, Chad, ,Haiti, Liberia, Mauritania, Nigeria, PNG, Somalia, Uganda and Yemen
	2.1.2	**Improve immunisation systems in GAVI countries through implementation of national health strategies supported by well aligned and functioning GAVI HSS grants**	i) Reprogramming completed in all countries where GAVI HSS grant is experiencing implementation challenges and the likelyhood of improving the performance of immunisation programmes is limited. ii) All recipient countries, supported by partners, have put in place satisfatory mechanisms for ongoing monitoring of implementation of GAVI HSS grants iii) GAVI HSS funding instruments and procedures for grant award and monitoring are simpler and more accomodating to diverse country contexts iv) 60% of GAVI HSS grants awarded since 2011 are fully aligned with the national health system development plans, which incorporates cMYPs	i) 80% of countries receiving GAVI HSS support demonstrate satisfactory implementation progress as asssessed by IRC, JANS or equivalent independent mechanism. ii) 80% of GAVI HSS grants awarded since 2011 are fully aligned with the national health system development plans, which incorporates cMYPs	i) 100% of countries receiving GAVI HSS support demonstrate satisfactory implementation progress as asssessed by IRC, JANS or equivalent independent mechanism. ii) 100% of GAVI HSS grants awarded since 2011 are fully aligned with the national health system development plans/strategies, which incorporate cMYPs* ** ie budgets derived from cMYPs are included in the MoH budget
2.2. Increase equity in access to services	2.2.1	**Increase equity** (including, geographic, social strata) **of routine immunisation**	4 out of the 10 countries* with the highest inequity in vaccination coverage, supported by partners, have identified the main drivers of inequity, are able to monitor inequities, have implemented equity action plans, and GAVI HSS grants contribute to the funding of these plans. * Nigeria, Yemen, Congo Rep (Brazzaville), India, Pakistan. Mozambique, Liberia, Vietnam, CAR, Madagascar	7 out of the 10 countries with the highest inequity in vaccination coverage, supported by partners, have identified the main drivers of inequity, are able to monitor inequitues, have implemented equity action plans, and GAVI HSS grants contribute to the funding of these plans.	At least 10 countries with the highest inequity in vaccination coverage*, have identified the main drivers of inequity, are able to monitor inequitues, have implemented equity action plans, and GAVI HSS grants contribute to the funding of these plans. * Nigeria, Yemen, Congo Rep (Brazzaville), India, Pakistan. Mozambique, Liberia, Vietnam, CAR, Madagascar
2.3. Strengthen civil society engagement in the health sector	2.3.1	Promote **active engagement of Civil Society Organisations** (CSOs)	At least 50% of countries, supported by partners, have actively engaged with CSO in the development, the implementation and the monitoring & evaluation of their GAVI HSS Grants, cMYPs and national health plans	At least 60% of countries, supported by partners, have actively engaged with CSO in the development, the implementation and the monitoring & evaluation of their GAVI HSS Grants, cMYPs and national health plans	At least 70% of countries, supported by partners, have actively engaged with CSO in the development, the implementation and the monitoring & evaluation of their GAVI HSS Grants, cMYPs and national health plans

GAVI Business Plan Deliverables

Strategic objective	PO	Programme objective	Interim deliverable (2013)	Interim deliverable (2014)	Programme deliverables (2015)
3.1. Increase and sustain allocation of national resources to immunisation	3.1.1	Countries successfully mobilise resources required in their annual plans and budgets.	Countries finance 20% more of the routine immunisation costs (or reach 95% government financing)	Countries finance 20% more of the routine immunisation costs (or reach 95% government financing)	Countries finance on average 70% of routine immunisation costs with government resources.
	3.1.2	**Implement the co-financing policy and secure domestic funding for all other routine vaccines**	100% of countries fulfill their co-financing requirement and at least 70% of countries finance all other routine vaccines from domestic sources	100% of countries fulfill their co-financing requirement and at least 80% of countries finance all other routine vaccines from domestic sources	100% of countries fulfill their co-financing requirement and at least 90% of countries finance all other routine vaccines from domestic sources
	3.1.3	**Support graduating countries** in sustaining investment in immunisation	100% of graduating countries have their vaccine requirements reflected in the 2014 national budget	a) 100% of graduating countries have their vaccine requirements reflected in the 2015 national budgets b) 100% of countries have the capacity and processes in place for successful graduation	100% of graduating countries for which GAVI support ends in 2015, co-finance 80% of the projected 2016 vaccine price.
3.2. Increase donor commitments and private contributions to GAVI	3.2.1	Expand and extend donor commitments	a) Raise 100% of the funds needed for the period 2011-2013, including through contributions from new donors		Mobilise100% of the long-term funds needed to meet country demand for 2011-2015 as defined by the expected expenditure forecast
	3.2.2	**Broaden the public and private sector donor base**	3 additional new donors secured by end of 2013		Secure at least 8 new public sector donors and at least 16 new private sector donors
3.3. Mobilise resources via innovative financing mechanisms	3.3.1	**Grow and develop GAVI's innovative finance product portfoli**o (including scaling of IFFIm)	• Secure agreement from the GAVI Board and key IFFIm donors on the future role of IFFIm in GAVI's long-term funding strategy • $60 million commitments secured for the GAVI Matching Fund • Agree new third "+1" transaction for the GAVI Matching Fund	• Meaningful replenishment of IFFIm as part of overall GAVI replenishment • $100 million commitments secured for the GAVI Matching Fund • Agree new third "+1" transaction for the GAVI Matching Fund	Develop 2 new innovative finance products and raise US$ 260m as part of the GAVI Matching Fund challenge
4.1. Ensure adequate supply to meet demand	4.1.1	**Strategically forecast the demand and supply** for all vaccines in the GAVI portfolio	Bi-annual strategic demand forecast delivered to Board and annual strategic supply forecast completed	Bi-annual strategic demand forecast delivered to Board and annual strategic supply forecast completed	Bi-annual strategic demand forecasts and annual strategic supply forecast with improved accuracy over previous year
	4.1.2	Ensure **efficient and effective vaccine procurement and supply chain management**	Procurement implemented for all GAVI-supported vaccines	Procurement strategies implemented for new GAVI-supported vaccines	Streamlined and uninterrupted vaccine supply for all GAVI-funded vaccines
4.2. Minimise costs of vaccines to GAVI and countries	4.2.1	Develop **instruments for lowering price to GAVI and countries and/or encouraging development of appropriate products**	One initiative or instrument to decrease cost and/or to accelerate product development to GAVI and countries.	Two initiatives or instruments to decrease cost and/or to accelerate product development to GAVI and countries.	3 new initiatives or instruments to decrease cost and/or accelerate product development
AC1.1. Position GAVI effectively to deliver on its mission	AC 1.1.1	The value of immunisation, new vaccines, and GAVI is understood amongst **key influencers and stakeholders**	Increased stakeholders awareness, through increased visibility in media overall, higher presence in top-tier media and increased diversity of media coverage from 2012 to 2013 as measured by media monitoring and market research indicators	Increased stakeholders awareness, through increased visibility in media overall, higher presence in top-tier media and increased diversity of media coverage from 2013 to 2014 as measured by media monitoring and market research indicators	Increased understanding of the value of immunisation and the GAVI Alliance amongst target stakeholders (as measured by monitoring of traditional and social media)
	AC 1.1.2	**Mobilised and empowered advocates** to inform GAVI's policies, support fundraising and help achieve its strategic goals	Annual growth in number of advocates engaged in key processes	Annual growth in number of advocates engaged in key processes	100-200 advocates actively engaged in key processes to raise awareness and engage donors and potential donors
	AC 1.1.3	Increased **influence in development aid policy settings**	Annual growth in number of key global and regional events with positive references to GAVI, immunisation and health	Annual growth in number of key global and regional events with positive references to GAVI, immunisation and health	Increased number of endorsements in key events and global/regional policy documents (e.g. AU Summit, G8)

GAVI Business Plan Deliverables

Strategic objective	PO	Programme objective	Interim deliverable (2013)	Interim deliverable (2014)	Programme deliverables (2015)
ME 1.1. Ensure that valid, reliable and useful measures of performance are available and used to support learning, management and release of funding	ME. 1.1.1	Ensure effective **routine programme monitoring that links decision making to performance**	Systematic routine grant monitoring system designed and deployed for all forms of GAVI support	Revised grant review and renewal system implemented	Rigorous performance monitoring of all GAVI grants to countries, with enhanced means of validation of country reported data and release of funding based on performance
	ME 1.1.2	Coordinate and conduct **targeted studies** to address key questions and meet critical information needs	Studies and evaluations for future years identified and past/ current year(s) completed (eg, HSS evaluation, graduated countries, scientific studies)	Studies and evaluations for future years identified; and past/ current year(s) completed (eg, partnership, AMC, graduated countries, scientific studies)	Filled knowledge and information gaps related to specific strategies through completion of studies identified by the Board and its committees
	ME 1.1.3	Evaluate the impact and cost-effectiveness of GAVI support to countries	Estimates of future deaths averted by new and underused vaccines updated and disseminated annually for all GAVI-supported countries Baseline data captured for comprehensive effectiveness and impact evaluations in 5 countries	Estimates of future deaths averted by new and underused vaccines updated and disseminated annually for all GAVI- supported countries Preliminary findings on effectiveness, cost effectiveness, and impact in 5 countries	Annual estimates of impact produced based on GAVI support to all countries, informed by direct measurement in 5 countries
	ME 1.1.4	Ensure availability and use of high quality **programmatic and epidemiological data**	8 countries are on track with the implementation of their corrective action plans for data quality	16 countries are on track with the implementation of their corrective action plans for data quality	24 countries are on track with the implementation of their corrective action plans for data quality
	ME 1.1.5	Meet established quality indicators for **surveillance** of diseases preventable by new and underused vaccines	50% of supported laboratories meet external quality assurance standards; 12 GAVI countries with functioning AEFI review committees.	70% of supported laboratories meet external quality assurance standards; 20 GAVI countries with functioning AEFI review committees	i) 90% of supported countries have laboratories that pass external quality assurance standards by end of 2015 ii) 30 countries have functioning national Adverse Events Following Immunisation systems for addressing vaccine safety alerts and significant safety issues
PO 1.1. Ensure that evidence-based policies are in place	PO 1.1.1.	Adapt and develop GAVI policies to respond to evolving environment	Policies to be revised for future years identified; and past/ current year(s) policy revisions completed (e.g. Vaccine investment strategy)	Policies to be revised for future years identified; and past/ current year(s) policy revisions completed (e.g. revision of co-financing policy)	At least 5 new policies or policy revisions reviewed and endorsed by the Board

Business plan activities and budgets

PO code	Macro activity	Activity	Entity
1.1.1 Improve country **decision-making structures, systems and processes**	NRA and NITAG strengthening	NRA and NITAG strengthening	WHO
	Generate vaccine specific data & information	HPV demonstration projects	WHO
		HPV demo projects implementation	AVI TAC
		YF & MenA risk assessments	WHO
		JE, typhoid, malaria activities	WHO
		Rubella decision making support	WHO
		Immunisation practices, procedures & product characteristics	GAVI Sec.
		Decision making processes in large countries	GAVI Sec.
	Assessments, lessons learned & improvement actions	Share lessons learned across countries on introductions	WHO
	In-country A&C	A&C communication tools using scientific evidence	AVI TAC
	Sec. staff	Country decision making - personnel	GAVI Sec.
	WHO staff	WHO staff	WHO
1.2.1 Improve the **quality of country planning, GAVI applications and performance reporting**	Communication on GAVI policies & procedures	Country Support team communication	AVI TAC
	Application support	Hib, PCV and rota application support (20 countries)	WHO
		HPV application support	WHO
		MR application & APR support	WHO
		HPV country application	AVI TAC
		Country decision making & application support (with lead on MR)	UNICEF
	Coordinate the review of applications & progress reports	Coordinate IRC and implement a revised monitoring mechanism	GAVI Sec.
	Operational planning	Operational planning for introductions	WHO
	Sec. staff	Country planning, applications, reporting - personnel	GAVI Sec.
	WHO staff	WHO staff	WHO
1.2.2 Prepare countries for **successful introductions** of new and underused vaccines	Global management of introduction activities	Global management of introduction activities across partners (HPV, RCV) [VI team]	GAVI Sec.
		Global management of introduction activities across partners (pneumo, rota, penta, MenA, YF) [VI team]	GAVI Sec.
	Support GAVI in-country activities	Country level coordination in support of routine immunisation programmes and ensure successful integration of new vaccines [CROs]	GAVI Sec.
	Vaccine specific introduction & roll-out support	Integrated introduction of new vaccines (with other interventions pneumo, diarrhoea, cervical cancer)	WHO
		MR introductions and SIAs	WHO
		HPV introduction support	WHO
		MenA introduction support	WHO
		YF routine & preventive campaigns	WHO
		In-country institution to support countries to introduce GAVI vaccines	Unallocated
	Healthworker training	Healthworker clinical training	WHO
	In-country Advocacy and Communication (A&C)	A&C in country across 7 countries	AVI TAC
		A&C Pakistan	AVI TAC
		A&C DRC	AVI TAC
		A&C Ethiopia	AVI TAC
		A&C India and Nigeria	AVI TAC
	Vaccine management/Cold chain & logistics	Stock & temperature monitoring, system development and piloting	UNICEF
		Cold chain inventories, upgrade & replacement plans	UNICEF
		CCL equipment selection database & country procurement decision making	UNICEF
		EVM assessments & improvement planning	UNICEF
		CCL system redesign and implementation	UNICEF
		CCL equipment capital fund	UNICEF
		Supply chain management training	UNICEF
		Supply chain management training	WHO
		Cold chain inventories, upgrade & replacement plans	WHO
		EVM assessments & improvement planning	WHO
		EVM improvement plan implementation	WHO
	Assessments, lessons learned & improvement actions	Pre- and post- introduction (PIE) & EPI reviews	WHO
		PIE improvement action implementation	WHO
	Sec. staff	Vaccine introduction preparation - personnel	GAVI Sec.
	WHO staff	WHO staff	WHO
1.2.4 Strengthen national capacity for planning of **behaviour change communication for new and underused vaccines within a country's disease control framework**	In-country communication plans	Development of national communication plans	UNICEF
		Communications on PCV & RV launches	UNICEF
		Impact surveys for communication activities	UNICEF
2.1.1 **Identify and address constraints to safe immunisation and service delivery in countries under 70% DTP3 coverage**	Technical assessments & action planning	Support to coverage improvement plans & HSS development	UNICEF
		HS bottlleneck assessments & action plans	WHO
		HS bottlleneck assessments & action plans	WHO
		Contingency for <70 data quality issues	WHO
		Assessment, action planning for six <70 countries	Unallocated
	Coverage Implementation support	Vaccine coverage improvement implementation support	WHO
		Vaccine coverage improvement implementation support	WHO
		Coordination of activities of partners at the country level aimed at addressing health system dete	GAVI Sec.
		Implementation support for countries implementing HSS grants (including under performing countries)	Unallocated
	Adapt the HSS mechanism	Streamlining GAVI programmatic approach to addressing HSS needs in underperforming countries and countries with special needs	GAVI Sec.
	Sec. staff	I&S delivery - personnel	GAVI Sec.
	WHO staff	WHO staff	WHO
2.1.2 **Improve immunisation systems in GAVI countries through implementation of national health strategies supported by well aligned and functioning GAVI HSS grants**	HSS mechanism redesign	Participation in global debate on HSS	GAVI Sec.
		Develop and systematically update policy and operational guidelines for countries on how to access GAVI HSS support, with particular focus on Performance Based Financing	GAVI Sec.
		Technical Advisory Group for Health System Strengthening	GAVI Sec.
		Develop academic training on HSS	Unallocated
	HSS grant application & reprogramming	HSS grant design & reprogramming	WHO
		HSS grant design & reprogramming	WHO
		HSS grant proposal pre-assessment	WHO
	HSS implementation support	Countries supported to implement GAVI-funded HSFP activities that contribute to effective routine immunisation programmes and successful integration of new vaccines	GAVI Sec.
	HSS grant monitoring	Development of a system of effective supervision of HSS grant implementation	GAVI Sec.
		Country supervision missions to assess the HSS grant implementation	GAVI Sec.
		HSS implementation & performance monitoring support	WHO
	HSS fiduciary control	Preventive Activities - Desk Financial Assessment (DFA)	GAVI Sec.
		Preventive Activities - Financial Management Assessment (FMA)	GAVI Sec.
		Detective Activities - Cash Programme Audit (CPA)	GAVI Sec.
		Monitoring/Screening	GAVI Sec.
		Investigative Activies - Investigations (INV)	GAVI Sec.
		Detective Activities - Follow-up Review (FUR)	GAVI Sec.
		Detective Activies - Joint Supervision Review (JSR)	GAVI Sec.
	Improve HSS M&E frameworks	Health data verification and service availability and readiness assessments (SARA)	WHO
		HSS M&E strategic planning support	WHO
		HSS data quality training and immunisation programme analysis	WHO
		Cause of death reporting improvements	WHO
	Sec. staff	TAP - personnel	GAVI Sec.
	WHO staff	WHO staff	WHO
2.2.1 **Increase equity** (including, geographic, social strata) **of routine immunisation**	Equity implementation support	Equity improvement plans & implementation (in 10 countries)	UNICEF
		Coordination of the work of Alliance partners in selected countries to develop viable strategies to tackle immunisation inequities	GAVI Sec.
	Develop global equity strategy	Global review of determinants of low coverage	WHO
		Equity global strategy & communication	AVI TAC
	Sec. staff	Routine Immunisation - personnel	GAVI Sec.
2.3.1 Promote **active engagement of Civil Society Organisations** (CSOs)	Development & support of GAVI CSO policy	CSO engagement in immunisation and health policy fora	GAVI Sec.
		Strategies & policies for CSO engagement	GAVI Sec.
	Support to in-country CSOs to engage in policy dialogue	Target countries have established a functional Civil Society platform to engage in immunisation and health system strengthening processes	CRS
		Capacity of country-level CSO platforms to engage in discussions around HSS activities for immunisation is strengthened	CRS
		Country-level CSO platforms are empowered to link communities with immunisation and health systems	CRS
		Project management	CRS
	Sec. staff	CSO, HSCC, ICC - personnel	GAVI Sec.

Business plan activities and budgets

PO code	Macro activity	Activity	Entity
3.1.1 Countries successfully mobilise resources required in their annual plans and budgets.	cMYP development & implementation	cMYP development & implementation	UNICEF
		cMYP development & implementation	GAVI Sec.
	Co-financing advocacy	Co-financing advocacy	WHO
	Immunisation expenditure tracking	Immunisation expenditure tracking	UNICEF
	WHO staff	WHO staff	WHO
3.1.2 **Implement the co-financing policy and secure domestic funding for all other routine vaccines**	Support to improve sustainability of national financing for immunisation	Countries supported to improve the sustainability of national financing for immunisation	GAVI Sec.
		Assessment & follow up of underperforming countries on immunisation financing	WHO
		Additional support to underperforming on immunisation financing	WHO
		Facilitate and participate in country assessments in priority countries that are underperforming on immunization financing	GAVI Sec.
		Support to countries underperforming on immunisation financing	UNICEF
	Co-financing advocacy	Co-financing Advocacy	AVI TAC
		Perform/facilitate global advocacy for financial sustainability and co-financing policy	GAVI Sec.
	Immunisation expenditure tracking	Immunisation expenditure tracking	WHO
	Global coordination of partners support to underperforming countries	Coordinate partners support (IF&S) and monitor and report country performance on co-financing	GAVI Sec.
	WHO staff	WHO staff	WHO
	Sec. staff	Co-financing - personnel	GAVI Sec.
3.1.3 **Support graduating countries** in sustaining investment in immunisation	Support to graduating countries	Graduating country transition plan implementation follow-up	WHO
		Graduating country situation assessments & transition plan development	WHO
		Graduating country advocacy & awareness	WHO
		Graduating country capacity building (procurement, pricing, decision making etc.)	WHO
		Graduating countries	GAVI Sec.
	WHO staff	WHO staff	WHO
3.2.1 Expand and extend donor commitments	Strategy development of donor engagement	Long-term Funding Strategy & consensus building approach (LTFS)	GAVI Sec.
	Key replenishment meetings	Key Replenishment Meetings	GAVI Sec.
	Donor engagement	Donor engagement & risk mitigation strategies	GAVI Sec.
		Current donor commitments - personnel	GAVI Sec.
	Strengthen GAVI support networks	Establish and strengthen GAVI support network	GAVI Sec.
3.2.2 **Broaden the public and private sector donor base**	IFFIm & AMC donor engagement	Manage IFFIm & AMC donors	GAVI Sec.
	Broaden donor base	Engage new public & private emerging donors	GAVI Sec.
	Support new instruments for LMICS & market shaping	Support new instruments for LMICs & market shaping	GAVI Sec.
	Sec. staff	Broaden donor base - personnel	GAVI Sec.
3.3.1 **Grow and develop GAVI's innovative finance product portfolio** (including scaling of IFFIm)	Manage IFFIm	Existing Innovative Finance portfolio, incl. IFFIm	GAVI Sec.
	Develop new Innovative Finance products	New IF initiatives & products	GAVI Sec.
		IF outreach and communications	GAVI Sec.
	Expand Matching Fund initiative	Matching fund structuring & implementation	GAVI Sec.
	Sec. staff	Innovative finance - personnel	GAVI Sec.
4.1.1 **Strategically forecast the demand and supply** for all vaccines in the GAVI portfolio	Generate Supply & Demand Forecast	SDF support	AVI TAC
		Document strategic demand forecasting processes, methods, and results accuracy	GAVI Sec.
		Strategic Demand Forecasts (20 year horizon)	GAVI Sec.
		Review accuracy of previous forecasts	GAVI Sec.
	Expand Supply & Demand Forecast	Strengthen the process to predict vaccine adoption in GAVI countries and MICs	GAVI Sec.
	Supplier landscape analysis	Dynamic view of supplier landscape & global strategic supply forecasts (10-year horizon)	GAVI Sec.
	Sec. staff	Supply and demand forecasts - personnel	GAVI Sec.
4.1.2 Ensure **efficient and effective vaccine procurement and supply chain management**	Vaccine procurement	Procure vaccines (UNICEF SD)	UNICEF SD
	Develop supply risk mitigation solutions to minimize interruption of supply	Risk mitigation solutions to minimize interruption of supply	WHO
	Sec. staff	Vaccine procurement - personnel	GAVI Sec.
4.2.1 Develop **instruments for lowering price to GAVI and countries and/or encouraging development of appropriate products**	Support acceleration of vaccine development	Development of appropriate standards for two new suppliers	WHO
		Development of appropriate quality for two GAVI priority vaccines	WHO
		Promote development of appropriate 2nd generation vaccines	WHO
	Design & implement vaccine procurement strategies	Design and implement roadmaps	GAVI Sec.
		Implement new procurement strategies	GAVI Sec.
	Sec. staff	Pricing & supply strategy - personnel	GAVI Sec.
	WHO staff	WHO staff	WHO
AC.1.1.1 The value of immunisation, new vaccines, and GAVI is understood amongst **key influencers and stakeholders**	Media stories	Targeted communication campaigns in key donor countries	GAVI Sec.
		GAVI media stories	AVI TAC
	Communication of results	Communicate results and increase visibility	GAVI Sec.
		Mid term review	AVI TAC
		Evidence base & Financing dialogue	GAVI Sec.
	Develop scientific communication	Scientific communication	AVI TAC
	Reputational risk management	Reputation risk management	AVI TAC
		Manage reputational risk	GAVI Sec.
	Redevelop GAVI brand	Redevelop the GAVI Brand	GAVI Sec.
	Sec. staff	Key stakeholder communication - personnel	GAVI Sec.
AC.1.1.2 **Mobilised and empowered advocates** to inform GAVI's policies, support fundraising and help achieve its strategic goals	Partnership with advocate networks	Relationships with advocate networks	GAVI Sec.
	Sec. staff	GAVI advocates - personnel	GAVI Sec.
AC1.1.3 Increased **influence in development aid policy settings**	Stakeholder support at high level policy & political fora	Stakeholders' support at high level policy and political fora	GAVI Sec.
		GAVI visibility in policy networks	GAVI Sec.
	Sec. staff	Policy influence	GAVI Sec.
ME.1.1.1 Ensure effective **routine programme monitoring that links decision making to performance**	Grant monitoring	Update and implement grant scorecards	GAVI Sec.
	Data management	Develop and manage data platforms and warehouse	GAVI Sec.
	M&E frameworks for policies & grants	Develop M&E frameworks for all new policies and initiatives	GAVI Sec.
	Develop and track business plan	Monitor and refine GAVI business plan	GAVI Sec.
	Sec. staff	Programme monitoring - personnel	GAVI Sec.
ME.1.1.2 Coordinate and conduct **targeted studies** to address key questions and meet critical information needs	Evaluation of GAVI policies & programmes	Complete Board and Committee requested studies and evaluations	GAVI Sec.
	Complete scientific targeted studies	Complete targeted studies of direct relevance to GAVI Alliance Strategy and Business Plan	TBD
	Sec. staff	Studies and evaluations - personnel	GAVI Sec.
ME.1.1.3 Evaluate the impact and cost-effectiveness of GAVI support to countries	Full country evaluations	Conduct full country evaluations	GAVI Sec.
	Project impact of future GAVI support	Project Impact of future GAVI Support	GAVI Sec.
	Sec. staff	Country evaluations - personnel	GAVI Sec.
ME.1.1.4 Ensure availability and use of high quality **programmatic and epidemiological data**	Coverage data collation, reporting & analysis	Coverage data collation, reporting & analysis	WHO
		Coverage data collation, reporting & analysis	UNICEF
	Coverage data improvement	National, regional and global level coverage estimate improvements	UNICEF
		National, regional and global level coverage estimate improvements	WHO
		Implement Immunization Data Quality Assessments	GAVI Sec.
	WHO staff	WHO staff	WHO
ME.1.1.5 Meet established quality indicators for **surveillance** of diseases preventable by new and underused vaccines	Vaccine specific surveillance	IBD and rotavirus surveillance (43 countries)	WHO
		IBD and rotavirus surveillance (43 countries)	WHO
		MenA surveillance	WHO
		YF surveillance	WHO
		Typhoid & JE surveillance	WHO
	NUVI cost effectiveness and impact assessments	NUVI cost-effective and impact assessments	WHO
	Vaccine safety	NRA support for vaccine safety	WHO
	WHO staff	WHO staff	WHO
Pol.1.1 Adapt and develop GAVI policies to respond to evolving environment	Vaccine Investment Strategy (VIS)	Vaccine Investment Strategy VIS (2013)	GAVI Sec.
	New policy development	New policy development (e.g. value of vaccines; cost of delivery)	GAVI Sec.
		Prioritization mechanism (2013)	GAVI Sec.
		Gender (2013)	GAVI Sec.
	Sec. staff	GAVI Secretariat personnel	GAVI Sec.