

GAVI Executive Committee Teleconference

27 August 2004

FINAL Summary Report

1 Immunization pilot of the International Finance Facility (IFF)

- Great progress was achieved at a meeting held at WHO headquarters in Geneva on 25-26 August to discuss and shape the programmatic elements of the proposed immunization pilot of the International Finance Facility (IFF). The formal meeting report will be distributed as soon as it is completed; in the meantime Pascal Villeneuve of UNICEF provided an oral summary of the main areas of discussion and consensus on the programmatic and governance issues:
 - **Regarding country eligibility:** Countries with less than \$1000 gross national income (GNI) per capita should be eligible for support from the IFF immunization pilot. Priority should be on countries with the lowest DTP3 coverage and greatest numbers of unvaccinated children, as demonstrated by disease burden. Consideration will also be given to large population countries with good national-level coverage but with persisting internal disparities (e.g. low coverage among minority groups).
 - **Regarding programmatic funding areas:** Two main 'windows' of support would be available – for immunization services strengthening and for new vaccines, with approximately one-half of the funding allocated to each window. Campaigns would be included in services strengthening to ensure that the campaigns serve to strengthen, and not weaken, routine services; the polio stockpile will be included in the new vaccines window.
 - **Regarding support for immunization services strengthening:** the underlying principle is for countries to develop national immunization acceleration plans, with proper weight given to both routine and campaigns based on countries' operational and epidemiological specificities. The objective here would be to frontload country-led acceleration plans to reach the 2015 U5MR/immunization targets by strengthening immunization services through an appropriate mix of routine and campaign strategies. For the purpose of finalizing the IFF proposal, we need to estimate the cost of the capital investments associated with frontloading country-level acceleration plans. However, during the implementation phase, flexibility should be allowed in the use of the IFF funds at country level to cover both capital and recurrent costs, in a way which ensures maximum benefits and complements other funding sources.
 - **Regarding governance and allocation process:** The GAVI/The Vaccine Fund country support process should be used to disburse funds from the IFF immunization pilot, modified as necessary. Country applications for IFF funding will be based on their own multiyear immunization plans and financial sustainability plans. Low-income countries under stress may need to be handled differently.
- When considering the practical issues of how the IFF immunization pilot funds will be managed and disbursed, such as the nature and location of the 'special purpose vehicle', it will be important to maintain strong communication links with the World Bank to ensure compatibility with the work being done on the larger IFF.
- It will be essential to engage the vaccine industry to secure their commitment to the goals of the IFF immunization pilot.

DECISIONS

The GAVI Executive Committee:

- 1.1 Commended WHO for organizing the meeting of 25-26 August.
- 1.2 Endorsed the general programmatic directions agreed at the meeting regarding the further development of the proposal for the IFF immunization pilot. The criteria for country eligibility and the programmatic balance of investments will need to be clearly justified in the revised proposal.

- 1.3 Endorsed and agreed to recommend to the GAVI Board the proposal to use the GAVI/The Vaccine Fund country application, review and support process, modified as necessary, as the governance and allocation mechanism to disburse funding from the IFF immunization pilot. At this stage modifications should be limited only to those most essential for implementing the IFF immunization pilot; others modifications should be considered within the existing processes to revise and improve GAVI procedures.
- 1.4 Endorsed the key founding principles for the governance and allocation mechanism of the IFF immunization pilot proposed in the paper drafted by WHO, 'Principles, Governance and Operational Mechanisms', namely:
 - 1.4.1 It should be country-driven and strengthen and complement existing and ongoing initiatives for immunization, within the scope of the Global Immunization Vision and Strategies currently under development.
 - 1.4.2 It should contribute to, and not detract from, overall health systems strengthening.
 - 1.4.3 It should be aligned with poverty reduction strategies and oriented towards achieving the Millennium Development Goals.
 - 1.4.4 Funding should be prioritized to activities which are appropriately "frontloaded", benefiting from having higher levels of funding in the short term to minimize future aid needs in the long term.
 - 1.4.5 The funding should be aligned with and contribute to the strengthening of countries' existing systems and cycles of planning and budgeting for the health sector and immunization [including Sector-Wide Approaches (SWAp), Medium Term Expenditure Frameworks (MTEF), Multi-Year Plans for immunization, etc.].
 - 1.4.6 The funds should not displace existing immunization resources, and should be disbursed in ways that strengthen the ability of countries to take over the financial responsibility of their immunization programme.
 - 1.4.7 Funds should be set aside for international partners (specifically WHO and UNICEF) to provide technical assistance to countries for planning and proposal development, as well as implementation, including systems strengthening and monitoring.
 - 1.4.8 The allocation mechanism should allow for additional technical support based on needs as determined by performance monitoring and other necessary processes.
 - 1.4.9 Reporting requirements for monitoring and evaluation (and/or for the application process) should be streamlined.
- 1.5 Agreed to submit by email to Joy Phumaphi any additional comments on the above paper.
- 1.6 Approved the creation of a special IFF immunization pilot task team to support the work on the development of the IFF immunization pilot (replacing the 'trio plus' group). It will be chaired by Joy Phumaphi; its composition will correspond to that of the GAVI working group.
- 1.7 Requested WHO to clarify exactly what is needed by DFID – both in response to the DFID Secretary General's 9 August letter to the GAVI Chair, as well as the project proposal requested by 1 October.
- 1.8 Agreed that the GAVI Board should have an opportunity to review the revised IFF immunization pilot proposal prior to its submission to the donors on 1 October. The draft will therefore be distributed to the GAVI Board on 20 September and discussed on the 29 September Board teleconference.

2 Next Board teleconference, EC meeting

DECISIONS

The GAVI Executive Committee:

- 2.1 Recommends that a one-hour teleconference of the GAVI Board be held on Wednesday 29 September. The IFF immunization pilot and the investment case framework will be on the agenda for that teleconference.
- 2.2 Agreed to consider holding the next meeting of the GAVI EC in Geneva for one afternoon on one of the days between 8-11 November.
- 2.3 Requested that all EC members convey their availability to the GAVI Secretariat regarding the above Board teleconference and GAVI EC meeting.