Programme and Policy Committee Meeting 2 February 2009 Meeting Report

Attendance:

PPC members

Sissel Hodne Steen (chair)

George Bickerstaff, Okwo Bele, Ashutosh Garg, Suresh Jadhav, Rama Lakshminarayanan, Steve Landry, Susan McKinney, Olga Popova, Aldo Tagliabue

Nonvoting expert participant

David Salisbury

Secretariat

Nina Schwalbe, Lisa Jacobs, Hostencia Esua (other attendees noted in agenda)

Regrets

Majid Al-Junaid, Joan Awunyo-Akaba, John Clemens, Ahmed Megan

Working procedures

Sissel Hodne Steen led a discussion on the role of and working procedures for the committee.

- The PPC Charter forms the basis for PPC's work. The PPC is a standing committee of the Board and therefore an instrument for the Board and reports to the Board. Only in few occasions will it report to the EC (when policy issues of urgency or at the specific request of the EC/Board).
- A question about the role of PPC in programme oversight was raised and PPC's relationship to the IRC.
- The PPC also raised concerns about strengthening the accountability and oversight of the IRC. This should be explored with the Governance Committee.
- PPC members agreed to play an active role between meetings, including leading task teams preparing for the Board meetings.
- The question about the need for a vice-chair was raised, but this was deferred until the committee had more clarity about the work load.
- The committee aims to work by consensus, but when there is dissention the minority opinions will be recorded and reported to the Board.
- The committee will meet face to face 4 times per year with 2 day meetings and by telecon in between only as necessary.
- PPC will consider asking the Chair of the IRC to participate in its meeting when required.
- The agenda will be set by the PPC chair in consultation with the GAVI Secretariat, based on directions from the Board, the PPC members, and other partners and stakeholders.
- The Secretariat should aim to have meeting materials distributed 2 weeks in advance of the meetings, and in hard copy if requested by committee members. Hard copies of presentations should be made available at the meeting and in electronic format afterwards.
- The Secretariat should insure that papers or guidance sought to the PPC clearly articulate decision points to be taken by the PPC and a recommendation from the Secretariat where appropriate.

• There was a recommendation that the PPC should consider the evaluation of activities for 2009-2010. Oversight for M&E is currently in the Board mandate. The Governance Committee will need to review the feasibility of this and how best to implement.

Action items

- Secretariat to liaise with Governance Committee for guidelines on conflict of interest and confidentiality.
- The PPC chair together with the Secretariat to liaise with Governance Committee to clarify the role of the IRC with relation to the PPC on programmatic issues. (First meeting of the Governance Committee – April 15th)

<u>GAVI Work Plan 2009/2010 – outstanding issues – (Marc Hofstetter, Rudi Eggers, Pooja Mall)</u>

- Marc Hofstetter reviewed outstanding issues on the 2009/2010 work plan. Specifically, the Board had approved the Work Plan Validation Committee's recommendation that the Programme and Policy Committee (PPC) should further discuss whether GAVI should continue funding activities that could also be considered core partner responsibilities. Rudi Eggers attended from WHO to answer questions on the WHO submission.
- While recognizing that not all activities proposed were necessarily 100 percent related to GAVI eligible countries, the risk of leaving them unfunded might be too high a risk, given how essential they are. The Board had already agreed, based on the Work Plan Validation Committee's recommendation that all activities were important and should be funded one way or another.
- There was a question about whether the activities proposed were those for which WHO and UNICEF could reallocate from their own funding.
- There was discomfort over the use of the word "core activities", especially in relation to WHO. Most of the committee felt that all activities performed by WHO are "core", so the question was better framed in terms of GAVI related versus non GAVI related activities. WHO responded that some were more general than for just GAVI countries.
- WHO stated that many donors had told them that money previously directed to WHO, was now directed to GAVI with expectation that partners were funded. This may be true for some donors, but not for all. Some donors are now providing more of funds to WHO as unearmarked funding. These funds provide WHO with the possibility to use the funds according to priorities and the largest funding gaps. However, as most donors still earmark funding, the strategic space for the organisation continues to be limited.
- The PPC was concerned that the information in hand was not adequate to facilitate a recommendation and that it was difficult to make decisions in the absence of a clear set of funding principles especially as the Board of the new entity is now legally responsible for its actions.
- The committee agreed that, the entire PPC would be involved in approval of the 2009 2010 work plans. The first step is to get a clear proposal on what is being requested for approval which would come after questions were submitted by the PPC to the Secretariat regarding the presentation. One of the areas discussed was the split of 2009 and 2010 work plans, but we could not conclude this until a clear proposal was presented.

- There was also a concern about a discrepancy between the numbers presented to the PPC and to the November Board. Marc clarified that this discrepancy was due to the fact that two activities had been dropped.
- The committee reflected that there were both short and long term issues:
 - In short term, there needs to be a decision about financial support for the concrete activities. It was agreed that most of the activities were probably critical to immunization, and that the risk of non-funding was greater than the risk of funding. It was important to maintain trust with the partners; however, it was felt that there was a need to see a more detailed analysis of the work plan and milestones articulated as transparency is critical to the successful functioning of the Alliance. The proposal was to move forward with 2009, but only fund 2010 contingent upon articulation of milestones and progress towards these.
 - In the long run, it is critical to identify principals for how GAVI should fund partner activities. This will also depend on donor's policies and arrangements for funding immunization activities.

Action items

- The conclusion was in the short term to create a sub group to review the issues and come back with a recommendation. A call to review the recommendation should take place by 15 February and should include the Finance team of the Secretariat as this is a financial decision. PPC members should submit any additional questions by 4 February.
- In the long term, the PPC would need to work out set principals for what types of activities GAVI should fund, which articulated GAVI's responsibilities and the responsibilities of partners, including donors, in funding immunization. This requires engagement with donors.

Health Systems Strengthening (HSS)/Technical Assistance (Craig Burgess)

- Craig Burgess gave a brief update on the Health Systems Strengthening program.
- He described the implementation plan for a pilot technical support model. This would include technical support for HSS as well as other GAVI cash support programs (ISS, CSO).
- The proposition is to explore a facilitated web based model, managed by an intermediary. Countries could access this database to identify appropriate technical assistance partners. The next step is to discuss this option with countries, and then develop it further through a design request for proposals. The pilot would start with IHP+ countries.
- Craig noted that present, most technical assistance is provided by multilateral agency staff and consultants (especially in fragile states). There are gaps in quality, transparency, control by and accountability to countries.

Recommendations

- The PPC expressed concerns about a global solution to a local problem and cautioned that in other areas, a global web based did not often serve the needs of countries. Perhaps regional options should be explored, including regional centers of excellence.
- There was a strong feeling that any solution should be sustainable and that it may be better to work with existing systems (i.e. multilateral partners) rather than create a new one.

- Long term costs (post-pilot) should be carefully examined.
- There may not be enough technical assistance providers to justify to the project. This should be explored.
- There was some confusion about the amount of money needed for the pilot. It was clarified that the board had approved \$900,000 over two years for these activities. Unclear whether the amount covered all costs related to the pilot.
- Country consultations are critical as are further bilateral conversations with WHO, UNICEF, and the World Bank. The full spectrum of solutions should be discussed during these consultations.
- A one size fits all model may not be appropriate. Some countries are more capable than others in determining specifically the type of technical support they require and how they might evaluate the quality of the potential support.

Action items

• The committee requested the Secretariat report back on the results of the consultations and the proposed way forward.

Eligibility – update on process for review (Gian Ghandi by phone)

• Gian Ghandi described the process by which the eligibility criteria will be reviewed and requested feedback on the process. He also proposed a draft terms of reference for a time limited PPC task team to steer the work. The members were very impressed and described the piece of work as an excellent paper and very good framework for moving forward.

Decisions

- Rama Lakshminarayanan was selected by PPC to be the chair of the eligibility task team, facilitated by the Secretariat.
- Membership will be determined by PPC Chair and Rama. Industry will nominate an expert to this task team which will consist of 5 to 7 people either coming from GAVI constituencies or who are people in senior positions in the field of global public health, health financing, etc. This will be circulated to the PPC for approval on a no-objection basis.

<u>Update on data task team (Nina Schwalbe on behalf of Peter Hansen)</u>

- Nina Schwalbe updated the PPC on work of the Secretariat-appointed data task team which has been asked to review the programme impact metrics GAVI currently uses and propose changes, as needed. The group has met 3 times and its recommendations will be submitted in time for the Secretariat to report back to the Board at the March retreat.
- The preliminary recommendations from the task team include:
 - -Strengthen country administrative data systems.
 - -Improve Data Quality Audit and Self-Assessment.
 - -Increase frequency and systematic use of large multi-topic household surveys.
 - -Encourage innovation in measurement.
 - -Strengthen WHO/UNICEF estimates review process: increase transparency, formalize systematic approach.

• In response to the Lancet article of GAVI's ISS program, the Secretariat has reviewed data from all countries which participate in the ISS process. A report on the findings will also be presented to the Board in March. It was envisioned that the results of this exercise, together with recommendations from the evaluation commission in 2007 could result in a proposal to change the design of the ISS program.

Recommendations

- PPC requested the Secretariat and Board to look into how ISS payment to countries whose data was consistent could resume as soon as possible.
- PPC recommended to consider how to combine the results of the evaluation of the HHS with a review of the ISS program
- The GAVI Secretariat should ensure that any intentional misreporting is dealt with appropriately
- The PPC recommended that the audit and finance committee be engaged in the case of any suspected misappropriation of funding.

Action items

• Secretariat to draft terms of reference for review and redesign of the ISS program for PPC discussion.

IHP update and key issues for 2009 (Craig Burgess, Bob Fryatt)

- At its October 2008 meeting, the GAVI Alliance Board endorsed continued development and implementation of a strengthened business model in a limited number of IHP-ready countries, initially Mozambique and Ethiopia.
- The Secretariat updated the PPC on work to date.
- Discussion ensued on how GAVI would review and approve applications from these countries.
- A few models were discussed, ranging from participant in validation models to designation of that responsibility to a partner. It was proposed that in the case of the IHP+ countries, the IRC may validate the process, rather than the application itself. PPC members felt it was critical to ensure that any validation framework included appropriate indicators for immunization.
- They also agreed with a need for alignment with the Global Fund for AIDS, TB and Malaria.
- Craig reported that a statement on alignment would likely be included in the communiqué from the upcoming ministerial meeting on IHP+.
- The PPC also discussed the potential for including all windows of GAVI through the IHP+ national health planning process.
- Susan McKinney noted that IHP+ countries overlap with USAID maternal-child health focus countries so USAID has considerable investment in these countries.
- Susan McKinney raised a potential donor concern. For example the U.S. Congress specifically
 provides funds to GAVI with the mandate of immunizing greater numbers of children against
 vaccine preventable diseases with vaccine and immunization specific indictors. These funds are
 not provided so GAVI can channel donor funds to donor budget support. As USAID has
 programs in many GAVI eligible countries, if Congress or USAID wanted to support
 immunization through budget support at country level, it could do it itself. Neither USAID nor

- the U.S. Congress would choose to channel funds through GAVI to country level budget support.
- One of the key improvements through the IHP+ is that there would be "more" oversight on fiduciary issues etc. since all the partners would review with government the progress in the health sector.
- Concerned about Mozambique applied for HSS twice and failed because of no multiyear plan they haven't met clear qualifying requirements.

Action items

- Secretariat to share the final communiqué from the IHP+ ministerial meeting with the PPC
- The Secretariat will continue to explore funding Mozambique and Ethiopia through IHP+, as
 well as participate in missions for other countries, as they arise to develop further the model for
 how GAVI would participate.
- Develop an options paper for the PPC on GAVI engagement in IHP+ countries.

Overview of issues to be addressed in 2009 (Nina Schwalbe)

- Nina Schwalbe presented issues for Board review in 2009 and made a recommendation for which issues should need to be guided by the PPC.
- For the June Board these include an ISS update, the donation policy, IHP country compacts and Phase 1 Evaluation follow-up, depending on the results of the Board retreat.
- For the November Board, IRC recommendations, GAVI country eligibility, next steps on HSS, and vaccine investment strategy implementation plans will all be discussed.
- There was a recommendation that PPC also consider the evaluation of activities for 2009-2010.
- Lisa Jacobs noted that oversight for M&E is currently in the Board mandate. Governance Committee will need to review feasibility of this.

Next meetings

- Telecon to be scheduled for week of 16th February.
- Face to face meetings:
 - -15 to 16 April in Geneva
 - -1 and 2 October, location to be determined
 - -A fourth meeting will probably be scheduled in June or July.