

GAVI Alliance

# Annual Progress Report **2014**

submitted by

## the Government of **REPUBLIC OF CONGO (Brazzaville)**

Reporting year: **2014**

Support application for the year: **2016**

Date of presentation: **05/15/2015**

**Deadline for submission: 05/27/2015**

Please submit the Annual Progress Report **2014** via the online platform <https://AppsPortal.gavialliance.org/PDExtranet>

Enquiries to: [apr@gavialliance.org](mailto:apr@gavialliance.org) or representatives of a GAVI Alliance partner. Documents may be provided to GAVI Alliance partners, their staff and the public. The APR and its appendices must be submitted in English, French, Spanish, or Russian.

**Note:** Please use previous APRs and approved Proposals for GAVI support as reference documents. Electronic copies of previous annual progress reports and approved requests for support are available at the following address <http://www.gavialliance.org/country/>

The GAVI Secretariat is unable to return submitted documents and attachments to the country. Unless otherwise stated, the documents will be made available to the GAVI Alliance partners and the general public.

**GAVI ALLIANCE  
GRANT TERMS AND CONDITIONS**

**FUNDING USED SOLELY FOR APPROVED PROGRAMS**

The applicant country ("Country") confirms that all funding provided by the GAVI Alliance will be used and applied for the sole purpose of conducting the program(s) described in the Country's application. Any significant change in the approved program(s) must be reviewed and approved in advance by the GAVI Alliance. All funding decisions for the application are made at the discretion of the GAVI Alliance Board and are subject to the Independent Review Committee (IRC) and its processes and the availability of funds.

**AMENDMENT TO THIS PROPOSAL**

The Country will notify the GAVI Alliance in its Annual Progress Report if it wishes to propose any changes to the program(s) in the current application. The GAVI Alliance will document any changes that it has approved and the Country's application will be amended accordingly.

**REIMBURSEMENT OF FUNDS**

The Country agrees to reimburse, to the GAVI Alliance, all funding that is not used for the program(s) described in this application. The country's reimbursement must be in US dollars and be provided, unless otherwise decided by the GAVI Alliance, within sixty days after the Country receives the GAVI Alliance's request for a reimbursement. The reimbursed funds will be paid to the account or accounts as directed by the GAVI Alliance.

**SUSPENSION/CANCELLATION**

The GAVI Alliance may suspend all or part of its funding to the Country if it has reason to suspect that funds have been used for purposes other than for the programs described in this application, or any GAVI Alliance-approved amendment to this application. The GAVI Alliance retains the right to terminate its support to the Country for the programs described in this application if any misuse of GAVI Alliance funds is confirmed.

#### ANTICORRUPTION

The Country confirms that funds provided by the GAVI Alliance shall not be offered by the Country to any third person, nor will the Country accept any gifts, payments or benefits directly or indirectly related to this application, that could be construed as illegal or corrupt.

#### AUDITS AND RECORDS

The Country will conduct annual financial audits, and share these with the GAVI Alliance, as requested. The GAVI Alliance reserves the right, on their own or through an agent, to perform audits or other financial management assessments to ensure the accountability of funds disbursed to the Country.

The Country will maintain accurate accounting records documenting how GAVI Alliance funds are used. The Country will keep its accounting records in accordance with its government-approved accounting standards for at least three years after the date of last disbursement of the GAVI Alliance funds. If there are any claims of misuse of funds, the Country shall maintain such records until the audit findings are final. The Country agrees not to assert any documentary privilege against the GAVI Alliance in connection with any audit.

#### CONFIRMATION OF LEGAL VALIDITY

The Country and the signatories for the Country confirm that this support application is accurate and correct and forms legally binding obligations on the Country, under the Country's law, to conduct the programs described in this application.

#### CONFIRMATION REGARDING COMPLIANCE WITH THE GAVI ALLIANCE TRANSPARENCY AND ACCOUNTABILITY POLICY

The Country confirms that it is familiar with the GAVI Alliance Transparency and Accountability Policy and complies with the requirements therein.

#### USE OF COMMERCIAL BANK ACCOUNTS

The Country is responsible for undertaking the necessary due diligence on all commercial banks used to manage GAVI cash-based support. The Country confirms that it will take all the responsibility for replenishing GAVI cash support lost due to bank insolvency, fraud or any other unforeseen event.

#### ARBITRATION

Any dispute between the Country and the GAVI Alliance arising out of or relating to its application that is not settled amicably within a reasonable period of time will be submitted to arbitration at the request of either the GAVI Alliance or the Country. Arbitration will be conducted in accordance with the UNCITRAL Arbitration Rules in force. The parties agree to be bound by the arbitration award, as the final adjudication of any such dispute. The arbitration will be conducted in Geneva, Switzerland. The arbitration languages will be English or French.

For any dispute for which the amount is US\$ 100,000 or less, there will be one arbitrator appointed by the GAVI Alliance. For any dispute for which the amount is greater than US \$100,000, there will be three arbitrators appointed as follows: The GAVI Alliance and the Country will each appoint one arbitrator, and the two arbitrators so appointed will jointly appoint a third arbitrator who shall be the chairperson.

The GAVI Alliance will not be liable to the country for any claim or loss relating to the programs described in this application, including without limitation, any financial loss, conflicts of interest, harm to property, or personal injury or death. The country is solely responsible for all aspects of managing and implementing the programs described in this application.

#### ***By preparing this APR, the Country will inform GAVI about:***

*activities conducted using GAVI resources in the past year, significant problems that were*

*faced and how the country has tried to overcome them*

*meeting the accountability needs concerning the use of GAVI-disbursed funds and in-country arrangements with development partners for requesting more funds that had been approved in a previous application for ISS/NVS/HSS, but have not yet been released*

*how GAVI can make the APR more user-friendly while meeting GAVI's accountability and transparency principles.*

## 1. Characteristics of the support

Reporting year: **2014**

Support application for the year: **2016**

### 1.1. NVS AND INS SUPPORT

Type of Support	Current vaccine	Preferred presentation	Active until
New Vaccines Support (routine immunization)	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2015
New Vaccines Support (routine immunization)	DTP-HepB-Hib, 2 dose(s) per vial, LYOPPHILIZED	DTP-HepB-Hib, 2 dose(s) per vial, LYOPPHILIZED	2015
New Vaccines Support (routine immunization)	Rotavirus, 2 dose schedule	Rotavirus, 2 dose schedule	2015

New Vaccines Support (routine immunization)	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	2015
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**DTP-HepB-Hib (Pentavalent)** vaccine: based on the current preferences of your country, the vaccine is available through UNICEF in the liquid form in one- or ten-dose vials and in the liquid/lyophilized form in two-dose vials to be used in a schedule of three injections. The other presentations have already been pre-selected by the WHO and the complete list can be viewed on the WHO website, but the availability of each product should be individually confirmed.

## 1.2. Extension of the Program

Type of Support	Vaccine	Start Year	End Year
New Vaccines Support (routine immunization)	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2016	2017
New Vaccines Support (routine immunization)	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	2016	2016
New Vaccines Support (routine immunization)	Rotavirus, 2 dose schedule	2016	2018
New Vaccines Support (routine immunization)	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	2016	2016

## 1.3. ISS, HSS, CSO support

Type of Support	Reporting fund utilization in 2014	Request for approval of	Eligible for 2014 ISS reward
VIG	Yes	Not applicable	No

VIG: Vaccine Introduction Grant; COS: Campaign Operational Support

## 1.4. Previous IRC Report

No IRC report was produced for Djibouti for the previous year.

## 2. Signatures

### 2.1. Government Signatures Page for all GAVI Support (ISS, INS, NVS, HSS, CSO)

By signing this page, the **Government of the Republic of Congo (Brazzaville)**, hereby attests the validity of the information provided in the report, including all attachments, annexes, financial statements and/or audit reports. The Government further confirms that vaccines, supplies, and funds were used in accordance with the GAVI Alliance Standard Grant Terms and Conditions as stated in this Annual Progress Report (APR). For the Government of **the Republic of Congo (Brazzaville)**

Please note that this APR will neither be reviewed or approved by the High-level Review Committee without the signatures of both the Minister of Health & Minister of Finance or their authorized representatives.

Minister of Health (or delegated authority)		Minister of Finance (or delegated authority)	
Name	François IBOVI	Name	Gilbert ONDONGO
Date		Date	
Signature		Signature	

*This report has been compiled by (these persons can be contacted if the GAVI Secretariat has any queries regarding this document):*

Full name	Position	Telephone	E-mail
Dr Hermann Boris DIDI NGOSSAKI	EPI, Chief Doctor	(00242) 06 666 47 88	didi_boris@yahoo.fr
Dr Edouard NDINGA	EPI Counselor/WHO Surveillance WHO	00242 06 679 85 05	ndingae@afro.who.int
Dr Godefroy Mallandah	UNICEF EPI Administrator	(00242) 06 800 04 70	gmallandah@unicef.org

## 2.2. ICC Signatures Page

*If the country presents a report on the Immunization Services Support (ISS), Injection Safety (INS) and/or New and Under-Used Vaccines (NVS) supports*

**In some countries, the HSCC and ICC committees are merged into one committee. Please complete each relevant section and upload the signed sections of the attached documents twice, once for the HSCC signatures and once for the ICC signatures**

The GAVI Alliance Transparency and Accountability Policy is an integral part of GAVI Alliance monitoring of the country's performance. By signing this form the ICC members confirm that the funds received from the GAVI Alliance have been used for purposes stated within the approved application and managed in a transparent manner, in accordance with government rules and regulations for financial management.

### 2.2.1. ICC report endorsement

We, the undersigned members of the Inter-Agency coordinating Committee (ICC), endorse this report. Signing this document does not imply any financial (or legal) commitment on the part of the partner agency or individual.

Name/Title	Agency/Organization	Signature	Date
Dr FATOUMATA Binta Tidiane DIALLO	WHO Representative		
Mr. Aloys KAMOURAGIYE	UNICEF Representative		
Dr. Yolande VOUMBO MATOUMONA	Directorate General of Population		
Dr. GNEKOU MOU LIBABA	Director of Maternal and Child Health		
Dr. OYERE Jean Paul	Director of Family Planning		

Dr. Dzabatou Babeaux Angélie	Director of Communicable diseases		
Dr. Lambert KIREMBO	Director of Public Hygiene		
Mr. le Marcelin LEBELA	Directorate of Studies and Planning		
Representative, Ministry of Finance	Representative, Ministry of Finance		
Representative, Ministry of Planning	Representative, Ministry of Planning		
Representative, International Federation of Red Cross	Representative, International Federation of Red Cross		
Representative of the Red Cross	Representative of the Red Cross		
Representative of Medecins d'Afrique	Representative of Medecins d'Afrique		
Representative of the Evangelical Church of Congo (CSO)	Representative of the Evangelical Church of Congo (CSO)		
Representative of the Catholic Church (CSO)	Representative of the Catholic Church (CSO)		
Representative of the Church of Latter-day Saints (CSO)	Representative of the Church of Latter-day Saints (CSO)		
Representative of Brazzaville Health Committees (CSOs)	Representative of Brazzaville Health Committees (CSOs)		
Representative of the Islamic Community (CSO)	Representative of the Islamic Community (CSO)		

The ICC may wish to send informal comments to: [apr@gavi.org](mailto:apr@gavi.org) . All comments will be treated confidentially. Partners' observations:

Not applicable

Observations of the Regional Working Group:

Not applicable

### **2.3. HSCC Signatures Page**

Republic of Congo (Brazzaville) will not present a report on the use of funds for Health System strengthening (HSS) in 2014

### **2.4. Signatures Page for GAVI (Types A & B) support to CSOs**

Republic of Congo will not present a report on the use of CSO funds (Type A and B) in 2015

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## 4. Baseline and annual targets

Countries are requested to make a realistic evaluation of vaccine wastage, backed-up by an analysis of data collected at the national level. In the absence of specific data, the country can use the maximum wastage rates given for illustrative purposes in the **Wastage rate Table** appendix of the support request guidelines. Please note the reference wastage rate for the Pentavalent vaccine is available in ten-dose vials.

Please also note that if the country applies the WHO multi-dose vial policy for IPV, the maximum indicative wastage rates are 5%, 15% and 20% for the 1-dose, 5-dose and 10-dose presentations respectively.

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)							
	2014		2015		2016		2017		2018	
	Original approved target according to the Decision Letter	Reported	Original approved target according to the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates
Total number of births	196,348	196,348	202,239	202,239		208,306		214,555		220,992
Total number of infant deaths	14,726	14,726	15,168	15,168		15,623		16,092		16,575
Total number of surviving infants	181,622	181,622	187,071	187,071		192,683		198,463		204,417
Total number of pregnant women	196,348	196,348	202,239	202,239		208,306		214,555		220,992
Number of infants who received (should receive) <b>BCG vaccine</b>	186,531	178,755	192,127	192,127		197,890		203,827		209,942
<b>BCG coverage[1]</b>	95%	91%	95%	95%	0%	95%	0%	95%	0%	95%
Number of infants who received (should receive) <b>OPV3 vaccine</b>	172,541	156,243	177,717	168,364		179,195		188,540		194,196
<b>OPV3 coverage[2]</b>	95%	86%	95%	90%	0%	93%	0%	95%	0%	95%
Number of infants who received (should receive) <b>DTP1 vaccine[3]</b>	172,541	169,647	177,717	177,717		183,049		188,540		194,196
Number of infants who received (should receive) the <b>DTP3 vaccine [3][4]</b>	172,541	156,997	177,717	168,364		179,195		188,540		194,196
<b>DTP3 coverage[2]</b>	95%	86%	95%	90%	0%	93%	0%	95%	0%	95%
Wastage [5] rate during the reference year and anticipated thereafter (%) for the <b>DTP vaccine</b>	5	6	5	5		5		5		5
Wastage [5] factor during the reference year and anticipated thereafter for the <b>DTP vaccine</b>	1.05	1.06	1.05	1.05	1.00	1.05	1.00	1.05	1.00	1.05
Number of infants who received (should receive) the <b>1<sup>st</sup> dose of DTP-HepB-Hib vaccine</b>	172,541	169,647	177,717	177,717		183,049				
Number of infants who received (should receive) the <b>3<sup>rd</sup> dose of DTP-HepB-Hib vaccine</b>	172,541	156,997	177,717	168,364		179,195				
<b>DTP-HepB-Hib coverage [2]</b>	95%	86%	95%	90%	0%	93%	0%	0%	0%	0%
Wastage [5] rate in the base-year and planned thereafter (%)	5	6	5	5		5				

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)							
	2014		2015		2016		2017		2018	
	Original approved target according to the Decision Letter	Reported	Original approved target according to the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates
Wastage [5] factor in the base-year and planned thereafter (%)	1.05	1.06	1.05	1.05	1	1.05	1	1	1	1
Maximum wastage rate for the DTP-HepB-Hib vaccine, 2 dose(s) per vial, LYOPHILIZED	0%	10%	0%	10%	0%	10%	0%	10%	0%	10%
Number of infants who received (should receive) Yellow fever vaccine	168,908	141,275	177,717	159,011		173,415				
Yellow fever coverage[2]	93%	78%	95%	85%	0%	90%	0%	0%	0%	0%
Wastage [5] rate in the base-year and planned thereafter (%)	20	15	20	20		20				
Wastage [5] factor in the base-year and planned thereafter (%)	1.25	1.18	1.25	1.25	1	1.25	1	1	1	1
Maximum loss rate for Yellow fever vaccine, 10 dose(s) per vial, LYOPHILIZED	0%	40%	0%	40%	0%	40%	0%	40%	0%	40%
Number of infants who received (yet to receive) 1 <sup>st</sup> dose of Pneumococcal (PCV13) vaccine	163,914	164,757	177,717	177,717		183,049		188,540		
Number of infants who received (should receive) the 3 <sup>rd</sup> dose(s) of Pneumococcal (PCV13) vaccine	163,914	154,201	177,717	168,364		179,195		188,540		
Pneumococcal (PCV13) coverage[2]	90%	85%	95%	90%	0%	93%	0%	95%	0%	0%
Wastage [5] rate in the base-year and planned thereafter (%)	5	4	5	5		5		5		
Wastage [5] factor in the base-year and planned thereafter (%)	1.05	1.04	1.05	1.05	1	1.05	1	1.05	1	1
Maximum wastage rate for Pneumococcal (PCV13) vaccine, 1 dose(s) per vial, LIQUID	0%	5%	0%	5%	0%	5%	0%	5%	0%	5%
Number of infants who received (should receive) 1 <sup>st</sup> dose(s) of Rotavirus vaccine	163,914	127,026	168,831	168,831		173,415		182,586		194,196
Number of infants who received (yet to receive) 2 <sup>nd</sup> dose(s) of Rotavirus vaccine	0	97,275	149,657	149,657		163,780		178,617		190,108
Rotavirus coverage[2]	0%	54%	80%	80%	0%	85%	0%	90%	0%	93%
Wastage [5] rate in the base-year and planned thereafter (%)	5	5	5	5		5		5		5
Wastage [5] factor in the base-year and planned thereafter (%)	1.05	1.05	1.05	1.05	1	1.05	1	1.05	1	1.05

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)							
	2014		2015		2016		2017		2018	
	Original approved target according to the Decision Letter	Reported	Original approved target according to the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates	Previous estimates in 2014	Current estimates
Maximum wastage rate for Rotavirus vaccine, 2-dose schedule	0%	5%	0%	5%	0%	5%	0%	5%	0%	5%
Number of infants who received (should receive) the 1 <sup>st</sup> dose of Measles Vaccine	168,908	145,408	177,717	159,011		173,415		182,588		190,108
Measles coverage [2]	93%	80%	95%	85%	0%	90%	0%	92%	0%	93%
Pregnant women immunized with TT+	186,531	168,349	192,127	182,015		197,890		203,827		209,942
TT+ coverage [7]	95%	86%	95%	90%	0%	95%	0%	95%	0%	95%
Vit A supplement to mothers within 6 weeks of the delivery	166,896	178,755	176,713	176,713		183,049		193,099		178,617
Vit A supplement to infants older than 6 months	168,908	145,350	177,717	168,364	N/A	173,415	N/A	182,588	N/A	190,108
Annual DTP Drop out rate [(DTP1-DTP3)/DTP1] x100	0%	7%	0%	5%	0%	2%	0%	0%	0%	0%

[1] Number of infants immunized against the number of births

[2] Number of infants immunized out of the total number of surviving infants

[3] Indicate the total number of children immunized with either DTP alone or combined

[4] Please ensure that the DTP3 cells are correctly completed

[5] The formula for calculating a vaccine wastage rate (as a percentage):  $[(A - B)/A] \times 100$ , whereby: A = the number of doses distributed for use according to the supply records with correction for stock balance at the end of the supply period; B = the number of vaccinations with the same vaccine in the same period.

[7] Number of pregnant women vaccinated with TT+ out of the total number of pregnant women

## 5. General Program Management Component

### 5.1. Updated Baseline and Annual Targets

**Note:** Please fill in the table in section 4 “Baseline and Annual Targets” before you continue

The numbers for 2014 must be consistent with those that the country reported in the **WHO/UNICEF Joint Reporting Form (JRF) notifying immunization activities for 2014**. The figures for 2015 - 2015 in Table 4 Baseline and Annual Targets should be consistent with those that the country provided to GAVI in the previous APR or in the new application for GAVI support or in the CMYP.

In the space below, please provide justification for those numbers in this APR that are different from those in the reference documents.

- Justification for any changes in the **number of births**

Not applicable. There isn't any change in the number of births.

- Justification for any changes in **surviving infants**:

Not applicable There wasn't any change in the number of surviving infants.

- Explanation of changes in targets, per vaccine. **Please note that for targets of more than 10%, the results from previous years must be justified. For the IPV, explanation should also be provided as attachment(s) to the APR for EACH change in target population.**

Changes in targets were performed on two vaccines: Pentavalent vaccine 3 whose initial target of 95% in 2015-2016 is reduced to 90% for 2015 and 93% in 2016.

The target for Yellow Fever and Measles vaccines which is reduced from 90% to 85% this reduction in targets is based on the results obtained during the year 2014, namely: Pentavalent 3: 86% instead of 90%, VAR at 80% and VAA at 79% instead of 85%.

- Justification for any changes in **Wastage by vaccine**

Not applicable There is no change to the objectives for the loss rate.

## 5.2. Monitoring the implementation of the GAVI gender policy

5.2.1. In the past five years, were the sex-disaggregated data on the coverage of DTP3 available in your country through administrative sources and/or surveys? **Yes, available**

If yes, please provide us with the latest data available and indicate the year in which this data was collected.

Data Source	Reference Year for Estimates	DTP3 coverage estimates	
		Boys	Girls
DHS Congo 2011-2012	2011	72.1	71.4
External review EPI 2014	2014	85	88

5.2.2. How have you been using the above data to address gender-related barriers to access to immunization?

Not applicable The DHS 2011-2012 and the EPI 2014 external review do not show any significant gender differences on vaccination coverage whatever the antigen. The EPI registers help to collect routine immunization data disaggregated by sex.

5.2.3. If no sex-disaggregated data is available at the moment, do you plan in the future to collect sex-disaggregated data in routine immunization reports? **Yes**

5.2.4. How do the gender-related barriers at the access and at the implementation of immunization services (for example, mothers with no access to the services, the gender of

the service provider, etc.) were resolved from the programs point of view? (For more information on these gender-related barriers, refer to the GAVI “Gender and Immunization” sheet at <http://www.gavialliance.org/fr/librairie/>)

For the Congo, “ the emphasis will be placed on the analysis of gender data per health district/ Department. This analysis will help take action to ensure equity of access to vaccination regardless of sex.

### 5.3. Overall Expenditure and Financing for Immunization

The purpose of **Table 5.3a** is to guide GAVI understanding of the broad trends in the immunization program expenditure and financial flow. Please fill the table using US\$.

Exchange rate used	1 US\$ = 500
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Only enter the exchange rate; do not enter the name of the local currency

**Table 5.3a:** Overall Expenditure and Financing for Immunization from all sources (Government and donors) in US\$.

Expenditure by Category	Expenditure Year 2014	Funding source						
		Country	GAVI	UNICEF	WHO	Other TFPs	Other TFPs	Other TFPs
Traditional vaccines*	204,069	204,069	0	0	0	0	0	0
New and Under-used Vaccines (NVS)**	4,339,572	1,466,701	2,872,871	0	0	0	0	0
Injection material (AD syringes and others)	264,868	78,239	186,629	0	0	0	0	0
Cold Chain equipment	27,193	27,193	0	0	0	0	0	0
Staff	265,814	265,814	0	0	0	0	0	0
Other routine recurrent costs	413,889	281,889	0	0	132,000	0	0	0
Other Capital Costs	0	0	0	0	0	0	0	0
Campaigns costs	2,591,336	950,436	0	781,433	859,467	0	0	0
Introduction of Rotavirus vaccine.		209,480	139,480	79,949	0	0	0	0
Total Expenditures for Immunization	8,106,741							
Total Government Health expenditures		3,483,821	3,483,821	861,382	991,467	0	0	0

Traditional vaccines: BCG, DTP, OPV, 1<sup>st</sup> of measles vaccine (or the combined MR, MMR), TT. Some countries will also include Herb and Hib vaccines in this row, if these vaccines were introduced without GAVI support.

### 5.4. Inter-Agency Coordination Committee (ICC)

How many times did the ICC meet in 2014? **6**

Please attach the minutes (**Document No. 4**) from the ICC 2015 meeting that endorsed this report.

List the key concerns or recommendations, if any, made by the ICC on sections [5.1 Reference data and annual targets carried out](#) to [5.3 Overall Immunization Expenditure and Funding](#)

The preoccupations of the ICC were:

1. Stagnant vaccination coverage
  2. Increasing and securing the finance for national immunization in the context of eligibility of Gavi, and also for the current budgetary constraints of the Congo, a nation heavily dependent on oil production.
  3. The weak rationalization of health districts which are the operational links in the implementation of immunization activities
  4. The need to revitalize the strategic ICC to better guide the programs actions and mobilize financial resources to achieve the fixed objectives.
- The ICC believes that Gavi should reconsider Congo's eligibility, which despite the macroeconomic indicators has had difficulty fulfilling its co-financing commitments (co-financing default over 2 consecutive years). This could induce in the coming months a significant stockout situation for co-financed vaccines. The ICC was informed of the continued advocacy efforts made by the Ministry of Health to the Ministry of Finance to mobilize the required funds for co-financing in 2014 and 2015.

Are any Civil Society Organizations members of the ICC? **Yes**  
**If yes, which ones?**

<b>List CSO members of the ICC:</b>
INTERNATIONAL RED CROSS
CONGOLESE RED CROSS
MEDECINS D'AFRIQUE
EVANGELICAL CHURCH OF CONGO
JESUS CHRIST CHURCH OF LATTER-DAY SAINTS
CATHOLIC CHURCH
FEDERATION OF THE HEALTH COMMITTEES
CONGO ASSISTANCE FOUNDATION

### 5.5. Priority actions in 2015 to 2016

What are the country's main objectives and priority activities for its EPI program from 2015 to 2016?

The objectives in 2015 and 2016 are:

1. Increase vaccine coverage as per the following projections: BCG: 95%, Pentavalent 3: 90 %; OPV3: 90%; MCV/YFV 85%; TTV2+: 90%.
2. Maintain the loss rates in line with the following projections: BCG: 30%; OPV: 10%; Pentavalent: 5%; MCV/YFV 20%; TTV: 15%.
3. Introduce the inactivated polio vaccine (IPV) by the end of the year on the entire national territory
4. Maintain the interruption on the spread of wild poliovirus;
5. Maintain the elimination status of maternal and neonatal tetanus (MNT)
6. Accelerate the implementation for the elimination of measles
7. Control yellow fever;
8. Increase national immunization funding ( with GAVI withdrawal)

Priority activities for 2015-2016 are:

1. Advocacy for the increase and secure financing of vaccines and vaccination
2. Securing stocks of traditional and co-financed vaccines
3. The extension of vaccination across the country;)
4. Strengthening cold chain capacity by acquiring Cold equipment and the implementation of the improvement plan for effective vaccine management( EVM)
5. Organization of the MLM course;
6. Technical and financial support for implementing the Reach Every District (RED) approach and other outreach strategies for unimmunized children.
7. Introduction of the inactive polio vaccine and the 2nd dose of Rotavirus vaccine

## 5.6. Progress of transition plan for injection safety

For all countries, please report on progress of transition plan for injection safety

Please report what types of syringes are used and the sources of funding sources for Injection Safety equipment in 2014

Vaccine	Types of syringes used in the 2014 routine EPI	Funding sources in 2014
FR BCG	AD syringe 0.05 ml and SAD syringe 2 ml	Government
FR Measles	AD syringe 0.5 ml and SAD syringe 5 ml	Government
FR TT	0.5 ml self blocking syringe	Government
FR DTP-containing vaccine	0.5ml self blocking syringe	Government and GAVI
IPV	NA	NA
Yellow Fever vaccine	SAB 0.5ml and SAD 5 ml	Government and GAVI
PCV-13	0.5 ml self blocking syringe	Government and GAVI

Does the country have an injection safety policy/plan? **Yes**

**If Yes:** Have you encountered any obstacles during the implementation of this plan/injection safety policy?

**IF NO:** When will the country prepare the injection safety policy/plan? (Please report in the box below)

If the use of AD syringes is systematic, the safety boxes need to be improved as there is an under-utilization.

Please explain how sharps have been disposed of in 2014 and any problems that were encountered, etc.

The wastes are primarily discarded by burning and burying. In health structures that have incinerators, high temperature incineration is the method used.

Difficulties remain in the handling of dry ice at the central level.

## **6. Immunization Services Support (ISS)**

### **6.1. Report on the use of ISS funds in 2014**

The Republic of Congo (Brazzaville) will not present a report on the use of ISS funds in 2014

### **6.2. Detailed expenditure of ISS funds during the calendar year**

The Republic of Congo (Brazzaville) will not present a report on the use of ISS funds in 2014

### **6.3. ISS Funding Application**

The request for expected ISS reward is not applicable for 2014 in the Republic of Congo (Brazzaville)



## 7. New and Under-used Vaccines Support (NVS)

### 7.1. Receipt of new & under-used vaccines for 2014 immunization program

7.1.1. Did you receive the approved amount of vaccine doses for the vaccination program in 2014 that GAVI stipulated in their Decision Letter? Please fill the table below

**Table 7.1:** Vaccines actually received in 2014 compared to the quantity approved for 2014.

Please also include any deliveries from the previous year received under this same Decision Letter.

	[ A ]	[ B ]	[ C ]	
Vaccine Type	Total doses for 2014 given in the decision letter	The number of total doses received by December 31, 2014	Total doses postponed from previous years and received in 2014	Has the country experienced a stockout at any level in 2014?
Pneumococcal (PCV13)	516,400	211,400	248,400	No
DTP-HepB-Hib	677,300	243,200	152,500	No
Rotavirus	430,400	348,000	0	No
Yellow fever	213,100	94,000	83,700	Yes

If numbers [A] and [B] are different, specify:

- What were the main problems encountered? (Was the lower than anticipated vaccine utilization due to a delay in the introduction of a new vaccine or lower coverage? Delay in shipments? Stock-outs? Excessive stocks? Problems with the cold chain? Doses discarded because VVM changed color or because of the expiry date?...)

Congo encountered stockouts including co-financed vaccines, particularly with the Yellow Fever vaccine.

This situation is due to the failure of Congo in co-financing for the third year consecutively. The stockout situation in Yellow Fever vaccine was noticed at all levels of the system for a period of one month.

Delivery of vaccines under co-financing in 2013 for Congo and borrowings from the neighboring countries helped avoid major stockouts during the year.

- What actions have you taken to improve vaccine management, e.g. such as adjusting the plan for vaccine shipments? (within the country and with the UNICEF Supply Division)

**GAVI would also appreciate feedback from countries on the feasibility and interest of using and being provided with multiple Pentavalent vaccine presentations (1 dose and 10 dose vials), so as to reduce wastage and cost to a minimum and optimize coverage.**

Briefings on vaccine management were carried out at the site of the logisticians in the health districts. Additionally, stock management strengthening was implemented at all levels.

If **Yes**, for any vaccine in **Table 7.1**, indicate the duration, reason and the impact of the stock-out even if the stock-out occurred at the central, regional, district or at a lower level.

The Yellow Fever vaccine encountered a stockout situation for about 4 weeks at the central and peripheral levels. This situation resulted in a low coverage rate for this antigen with a difference for the Measles Vaccine administered at the same time.

## 7.2. Introduction of a New Vaccine in 2014

7.2.1. If you have been approved by GAVI to introduce a new vaccine in 2014, please refer to the vaccine introduction plan in the approved proposal and report on achievements.

Yellow fever, 10 dose(s) per vial, LYOPHILIZED		
Nationwide introduction	No	
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	Not applicable

When will the Post Introduction Evaluation (PIE) be carried out? **January 2005**

Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID		
Nationwide introduction	No	
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	Not applicable

When is the Post introduction evaluation (PIE) planned? **October 2013**

Rotavirus, 1 dose(s) per vial, ORAL		
Nationwide introduction	Yes	24/04/2014
Phased introduction	No	24/04/2014
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	Yes	

When do you plan to conduct a Post introduction evaluation (PIE)? **June 2015**

DTP-HepB-Hib, 2 dose(s) per vial, LYPPHILIZED		
Nationwide introduction	No	
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	Not applicable

When will the Post Introduction Evaluation (PIE) be carried out? **January 2007**

7.2.2. If your country carried out a PIE in the past two years, please attach the relevant reports and provide a summary on the status of the implementation of any recommendations given in the PIE. (Document No.9)

Post introduction report on Pneumococcal vaccine introduced in September 2012.

### 7.2.3. Adverse Events Following Immunization (AEFI)

Is there a national dedicated vaccine pharmaco-vigilance capacity? **No**

Is there a national AEFI expert review committee? **No**

Does the country have an institutional development plan for vaccine safety? **Yes**

Is the country sharing its vaccine safety data with other countries? **No**

Has your country implemented a risk communication strategy along with national preparedness plans to deal with possible immunization issues? **No**

### 7.2.4. Supervision

Has your country set up a sentinel monitoring system for:

a. rotavirus diarrhea? **No**

b. bacterial meningitis or pneumococcal or meningococcal disease in children? **Yes** Has your country carried out any specific studies on: a. Rotavirus diarrhea? **Yes**

b. Bacterial meningitis or pneumococcal or meningococcal disease in children? **Yes**

If yes, does either the National Technical Advisory Group on Immunization (NITAG) or the Interagency Coordinating Committee (ICC), regularly examine the data from the national sentinel surveillance and from any specific surveys to make recommendations on the quality of data produced and on how to further improve the quality of these data? **No**

Are you planning to use data from national sentinel surveillance and/ or special studies to monitor and assess the impact of the introduction and use of the vaccines? **Yes**

Please describe the results of any surveillance or specific studies and the contribution made by any NITAGs or ICCs:

Not applicable

## 7.3. Lump sum allocation for the introduction of a new vaccine in 2014

### 7.3.1. Financial Management Reporting

	Amount in US\$	Amount in local currency
Funds received in 2014 (A)	139,480	69,740,089
Balance of funds carried forward from 2013	0	0
Total Available Funds in 2014 (C=A+B)	139,480	69,740,089
Total expenditure in 2014(D)	139,480	69,740,089
Balance carried over to 2015 (E=C-D)	0	0

Detailed expenditure from the New Vaccines Introduction Grant funds during the calendar year 2014

Please attach a detailed financial statement for the use of ISS funds during the calendar year 2014

(Document No. 10, 11). The terms of reference for this financial statement are attached in **Annex 1**. Financial

statements should be signed by the Finance Manager of the EPI Program and the EPI Manager, or by the Permanent Secretary of Ministry of Health.

### 7.3.2. Program Report

Please report on major activities that have been undertaken in relation to the introduction of a new vaccine, using the GAVI New Vaccine Introduction Grant.

The main activities carried out with the GAVI funds were:

1. Availability of data collection and management facilities
2. Providing the health districts with vaccines and other inputs
3. Organization of communication activities in the locality on the vaccine including community meetings in villages and neighborhoods;
4. Organization of advanced and mobile strategies in difficult to access areas and reaching the vulnerable populations (natives);
5. Organization of recurring training sessions for nearly 1,053 agents throughout the national territory

Please describe any problem encountered in the implementation of the planned activities.

Not applicable

Please describe the activities that will be undertaken with the balance of funds carried forward to 2015

Not applicable

### 7.4. Report on country co-financing in 2014

**Table 7.4:** Five questions on country co-financing

	Q.1: What were the actual co-financed amounts and doses in 2014?	
Co-Financed Payments	Total Amount in US\$	Total Amount in Doses
Selected vaccine #1: Yellow fever, 10 dose(s) per vial, LYOPHILIZED	0	0
Selected vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0	0
Selected vaccine #3: Rotavirus, 1 dose(s) per vial, ORAL	0	0
Selected vaccine #4: DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	0	0
	Q.2: What were the shares of country co-financing during the reporting year 2014 from the following sources?	
Government	0	
Donor	0	
Others	0	

	<b>Q.3: Did you procure related injection supplies for the co-financing vaccines? What were the amounts in US\$ and in supplies?</b>	
<b>Co-Financed Payments</b>	<b>Total Amount in US\$</b>	<b>Total Amount in Doses</b>
Selected vaccine #1: Yellow fever, 10 dose(s) per vial, LYOPHILIZED	0	0
Selected vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0	0
Selected vaccine #3: Rotavirus, 1 dose(s) per vial, ORAL	0	0
Selected vaccine #4: DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	0	0
	<b>Q.4: When do you intend to transfer funds for co-financing in 2016 and what is the expected source of this funding?</b>	
<b>Schedule of Co-Financing Payments</b>	<b>Proposed Payment Date for 2016</b>	<b>Funding source</b>
Selected vaccine #1: Yellow fever, 10 dose(s) per vial, LYOPHILIZED	february	Government
Selected vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	february	Government
Selected vaccine #3: Rotavirus, 1 dose(s) per vial, ORAL	february	Government
Selected vaccine #4: DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	february	Government
	<b>Q.5: Please state any Technical Assistance needs for developing financial sustainability strategies, mobilizing funding for immunization, including for co-financing.</b>	
	Need support for advocacy at the highest level to increase as well as to implement sustainable financing mechanisms for vaccination.	

**\*Note:** cofinancing is not mandatory for the IPV

Is GAVI's new or under-used vaccines and injection supply support reported in the national health sector budget? **Yes**

## 7.5. Vaccine Management (EVSM/EVM/VMA)

Please note that Effective Vaccine Store Management (EVSM) and Vaccine Management Assessment (VMA) tools have been replaced by an integrated Effective Vaccine Management (EVM) tool. The information on the EVM tool can be found at

[http://www.who.int/immunization/programmes\\_systems/supply\\_chain/evm/en/index3.html](http://www.who.int/immunization/programmes_systems/supply_chain/evm/en/index3.html)

*It is mandatory for the countries to conduct a Vaccine Management Assessment (VMA) prior to an application for the introduction of a new vaccine. This assessment concludes with an Improvement Plan including activities and timelines. The progress of the implementation of this plan is reported in the Annual Progress Report. The EVM assessment is valid for a period of three years.*

When was the latest Effective Vaccine Management (EVM) or an alternative assessment (EVSM/VMA) carried out? **October 2010**

Please attach the following documents:

- a) EVM assessment (**Document No 12**)
- b) the post-EVM improvement plan (**Document No. 13**)
- c) the progress report on the activities implemented during the year and the status of the implementation of the recommendations from the Improvement Plan (**Document No 14**)

A progress report on the EVM/VMA/EVSM improvement plan is a mandatory requirement

Have there been any changes in the Improvement plan, and why? **Non**

If yes, give details

Not applicable

When is the next Effective Vaccine Management (EVM) assessment planned? **July 2015**

## 7.6. Monitoring GAVI Support for Preventive Campaigns in 2014

Republic of Congo (Brazzaville) is not reporting on the NVS prevention campaign

## 7.7. Change of vaccine presentation

Republic of Congo (Brazzaville) does not require changes in the vaccine presentation in the coming years.

## 7.8. Renewal of multi-year vaccine support for those countries whose current support is ending in 2015

If **2015** is the last year of approved multi-year support for a vaccine and the country wishes to extend the GAVI support, the country must apply for an extension of the co-funding agreement with GAVI for vaccine support commencing from **2016** and for the duration of a new comprehensive multi-year plan (cMYP).

The country hereby requests an extension of GAVI support for the years **2016** to **2018** for the following vaccines:

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Rotavirus, 2 dose schedule**
- \* **DTP-HepB-Hib, 2 dose(s) per vial, LYPPHILIZED**

At the same time it commits itself to co-finance the procurement of the following vaccines in accordance with the minimum Gavi co-financing levels as summarized in section [7.11 Calculation of requirements](#).

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Rotavirus, 2 dose schedule**
- \* **DTP-HepB-Hib, 2 dose(s) per vial, LYPPHILIZED**

The multi-year support extension is in line with the new cMYP for the years 2016 to 2018, which is attached to this APR (Document N°16). The new costing tool is also attached (Document N°17) for the following vaccines:

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Rotavirus, 2 dose schedule**
- \* **DTP-HepB-Hib, 2 dose(s) per vial, LYPPHILIZED**

The country ICC has endorsed this request for extended support of the following vaccines at the ICC meeting whose minutes are attached to this APR. (Document No. 18)

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Rotavirus, 2 dose schedule**
- \* **DTP-HepB-Hib, 2 dose(s) per vial, LYPPHILIZED**

#### **7.9. Request for continued support for vaccines for the 2016 vaccination program**

In order to request NVS support for 2016 vaccination please do as follows:

Confirm here below that your request for 2016 vaccines support is as per table [7.11 Calculation of requirements](#) **Yes**

If this is not the case, please give reasons:

Not applicable



## 7.10. Weighted average prices of supply and related freight costs

**Table 7.10.1: Commodities Cost**

The estimated cost of supplies is not disclosed

**Table 7.10.2: Freight cost**

Vaccine Antigens	Vaccine Type	2007	2008	2009	2010	2011	2012	2013
Yellow fever, 10 dose(s) per vial, LYOPHILIZED	Yellow fever, 10 dose(s) per vial, LYOPHILIZED							
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID							
Rotavirus, 2 dose schedule	Rotavirus, 2 dose schedule							
DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED	DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED							

Vaccine Antigens	Vaccine Type	2014	2015	2016	2017	2018
Yellow fever, 10 dose(s) per vial, LYOPHILIZED	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	6.80%	6.30%	6.30%	6.10%	6.00%
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	5.90%	6.00%	5.90%	6.00%	6.10%
Rotavirus, 2 dose schedule	Rotavirus, 2 dose schedule	3.90%				
DTP-HepB-Hib, 2 dose(s) per vial, LYOPPHILIZED	DTP-HepB-Hib, 2 dose(s) per vial, LYOPPHILIZED	2.80%	3.30%	3.60%	3.40%	3.40%

## 7.11. Calculation of requirements

**Table 7.11.1: Characteristics for DTP-HepB-Hib, 2 dose(s) per vial, LYOPPHILIZED**

ID	Source		2014	2015	2016	TOTAL	
	Number of surviving infants	Parameter	#	181,622	187,071	192,683	561,376
	Number of children to be vaccinated with the first dose	Parameter	#	172,541	177,717	183,049	533,307

	<b>Number of children to be vaccinated with the third dose</b>	Parameter	#	172,541	177,717	179,195	529,453
	<b>Immunization coverage with the third dose</b>	Parameter	%	95.00%	95.00%	93.00%	
	<b>Number of doses per child</b>	Parameter	#	3	3	3	
	<b>Estimated vaccine wastage factor</b>	Parameter	#	1.05	1.05	1.05	
	<b>Stock in Central Store Dec 31, 2014</b>		#	53,300			
	<b>Stock across second level Dec 31, 2014 (if available)*</b>		#	53,300			
	<b>Stock across third level Dec 31, 2014 (if available)*</b>	Parameter	#				
	<b>Number of doses per vial</b>	Parameter	#		2	2	
	<b>AD syringes required</b>	Parameter	#		Yes	Yes	
	<b>Reconstitution syringes required</b>	Parameter	#		Yes	Yes	
	<b>Safety boxes required</b>	Parameter	#		Yes	Yes	
cc	<b>Country co-financing per dose</b>	Parameter	\$		1.72	1.94	
ca	<b>AD syringe price per unit</b>	Parameter	\$		0.0448	0.0448	
cr	<b>Reconstitution syringe price per unit</b>	Parameter	\$		0	0	
cs	<b>Safety box price per unit</b>	Parameter	\$		0.0054	0.0054	
fv	<b>Freight cost as % of vaccines value</b>	Parameter	%		3.30%	3.60%	
fd	<b>Freight cost as % of material value</b>	Parameter	%				

\* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

Not applicable

For Pentavalent vaccines, GAVI applies an indicator of 4.5 months of buffer stock + operational stock. The countries must indicate their needs in terms of buffer stock + operational stock, if they are different from the indicator for up to a maximum of 6 months. If you need help to calculate the levels of buffer and operational stocks, please contact the WHO or UNICEF. By default, the pre-selection provides a buffer stock+ operational stock for 4.5 months. **Not defined**

### Cofinancing table for **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED**

Co-financing group	Graduating
--------------------	------------

	2014	2015	2016
<b>Minimum co-financing</b>	1.36	1.66	2.06
<b>Recommended co-financing as per APR 2013</b>			2.06
<b>Your co-financing</b>	1.36	1.72	1.94

**Table 7.11.2:** Estimated GAVI support and country co-financing (**GAVI support**)

		2014	2015	2016
Number of vaccine doses	#	243,200	78,000	0
Number of AD syringes	#	257,400	80,700	0
Number of re-constitution syringes	#	133,800	43,000	0
Number of safety boxes	#	2,875	1,375	0
Total value to be co-financed by GAVI	\$	516,500	164,000	0

**Table 7.11.3:** Estimated GAVI support and country co-financing (**Country support**)

		2014	2015	2016
Number of vaccine doses	#	434,100	355,900	838,600
Number of AD syringes	#	459,200	367,300	892,600
Number of re-constitution syringes	#	238,700	195,700	461,300
Number of safety boxes	#	5,125	6,225	9,225
Total value of country co-financing <sup>[1]</sup>	\$	921,000	746,500	1,742,000

**Table 7.11.4:** Calculation of requirements for **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED** (section 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-financing	V			
B	Number of children to be vaccinated with the first dose	Table 4	172,541	177,717	
B 1	Number of children to be vaccinated with the third dose	Table 4	172,541	177,717	
C	Number of doses per child	The immunization schedule	3	3	
D	Number of doses required	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	517,623	533,151	
E	Estimated vaccine wastage factor	Table 4	1.05	1.05	
F	Number of doses required including wastage	$D \times E$		559,809	
G	Buffer stock of vaccines	<p><b>Buffer on doses needed + buffer on doses wasted</b>  <b>Buffer on doses needed</b> = <math>(D - D \text{ of previous year original approved}) \times 0,375</math>  <b>Buffer on doses wasted</b> =</p> <ul style="list-style-type: none"> <li>if(wastage factor of previous year current estimation &lt; wastage factor of previous year original approved): <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0,375</math></li> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>			
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0,375)$			
H 1	Initial stock calculated	$H2 (2015) + H3 (2015) - F (2015)$			
H 2	Stock on 1st January	Table 7.11.1	137,000	53,300	
H 3	Dispatch schedule	Approved volume		433,900	
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		433,900	
J	Number of doses per vial	Vaccine parameter			
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$			
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$			
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$			
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$			
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$			

<b>Q</b>	<b>Cost of the safety boxes required</b>	$M \times \text{unit price of safety boxes (cs)}$				
<b>R</b>	<b>Freight cost of required vaccines</b>	$N \times \text{Freight cost as \% of vaccine value (fv)}$				
<b>S</b>	<b>Freight cost of required material</b>	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$				
<b>T</b>	<b>Total funds required</b>	$(N+O+P+Q+R+S)$				
<b>U</b>	<b>Total country co-financing</b>	$I \times \text{Country co-financing per dose (cc)}$				
<b>V</b>	<b>Country co-financing % of GAVI supported proportion</b>	$U / T$				

As the shipment plan for 2014 is not yet available, the volume approved for 2014 is used as the best view of the shipment in 2014. The information will be updated when the shipment schedule is available.

**Table 7.11.4:** Calculation of requirements for **DTP-HepB-Hib, 2 dose(s) per vial, LYOPHILIZED** (section 2)

		Formula	2016		
			Total	Government	GAVI
A	Country co-financing	V	100.00%		
B	Number of children to be vaccinated with the first dose	Table 4	183,049	183,049	0
B1	Number of children to be vaccinated with the third dose	Table 4	179,195	179,195	0
C	Number of doses per child	The immunization schedule	3		
D	Number of doses required	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	543,713	543,713	0
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required including wastage	$D \times E$	570,899	570,899	0
G	Buffer stock of vaccines	<p><b>Buffer on doses needed + buffer on doses wasted</b>  <b>Buffer on doses needed</b> = <math>(D - D \text{ of previous year original approved}) \times 0,375</math>  <b>Buffer on doses wasted</b> =</p> <ul style="list-style-type: none"> <li><i>if(wastage factor of previous year current estimation &lt; wastage factor of previous year original approved):</i> <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0,375</math></li> <li><i>else:</i> <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>	4,159	4,159	0
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0,375)$	- 263,496	- 263,496	0
H1	Initial stock calculated	$H2 (2015) + H3 (2015) - F (2015)$	- 58,761	- 58,761	0
H2	Stock on 1st January	Table 7.11.1			
H3	Dispatch schedule	Approved volume			
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	838,600	838,600	0
J	Number of doses per vial	Vaccine parameter	2		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	892,505	892,505	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	461,231	461,231	0
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$	9,225	9,225	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	1,626,884	1,626,884	0
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	39,985	39,985	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	16,144	16,144	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	51	51	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	58,568	58,568	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	1,741,632	1,741,632	0
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	1,626,884		
V	Country co-financing % of GAVI supported proportion	$U / T$	100.00%		

As the shipment plan for 2014 is not yet available, the volume approved for 2014 is used as the best view of the shipment in 2014. The information will be updated when the shipment schedule is available.



**Table 7.11.1: Characteristics for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

ID	Source		2014	2015	2016	2017	TOTAL
	Number of surviving infants	Parameter #	181,622	187,071	192,683	198,463	759,839
	Number of children to be vaccinated with the first dose	Parameter #	163,914	177,717	183,049	188,540	713,220
	Number of children to be vaccinated with the third dose	Parameter #	163,914	177,717	179,195	188,540	709,366
	Immunization coverage with the third dose	Parameter %	90.25%	95.00%	93.00%	95.00%	
	Number of doses per child	Parameter #	3	3	3	3	
	Estimated vaccine wastage factor	Parameter #	1.05	1.05	1.05	1.05	
	Stock in Central Store Dec 31, 2014	#	247,500				
	Stock across second level Dec 31, 2014 (if available)*	#	247,500				
	Stock across third level Dec 31, 2014 (if available)*	Parameter #					
	Number of doses per vial	Parameter #		1	1	1	
	AD syringes required	Parameter #		Yes	Yes	Yes	
	Reconstitution syringes required	Parameter #		No	No	No	
	Safety boxes required	Parameter #		Yes	Yes	Yes	
cc	Country co-financing per dose	Parameter \$		2.72	3.63	3.57	
ca	AD syringe price per unit	Parameter \$		0.0448	0.0448	0.0448	
cr	Reconstitution syringe price per unit	Parameter \$		0	0	0	
cs	Safety box price per unit	Parameter \$		0.0054	0.0054	0.0054	
fv	Freight cost as % of vaccines value	Parameter %		6.00%	5.90%	6.00%	

\* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

Not applicable

**Co-funding tables for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

Co-financing group	Graduating
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	2014	2015	2016	2017
Minimum co-financing	2.06	2.71	3.63	3.57
Recommended co-financing as per APR 2013			3.63	3.57
Your co-financing	2.16	2.72	3.63	3.57



**Table 7.11.4:** Calculation of requirements for **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID** (part 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-financing	V			
B	Number of children to be vaccinated with the first dose	Table 4	163,914	177,717	
C	Number of doses per child	The immunization schedule	3	3	
D	Number of doses required	$B \times C$	491,742	533,151	
E	Estimated vaccine wastage factor	Table 4	1.05	1.05	
F	Number of doses required including wastage	$D \times E$		559,809	
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0,25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$			
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$			
H <sub>2</sub>	Stock on 1st January	Table 7.11.1	0	247,500	
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		572,400	
J	Number of doses per vial	Vaccine parameter			
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$			
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$			
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$			
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$			
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$			
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$			
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$			
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$			
T	Total funds required	$(N+O+P+Q+R+S)$			
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$			
V	Country co-financing % of GAVI supported proportion	$U / T$			

**Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 2)**

		Formula	2016		
			Total	Government	GAVI
A	Country co-financing	V	100.00%		
B	Number of children to be vaccinated with the first dose	Table 4	183,049	183,049	0
C	Number of doses per child	The immunization schedule	3		
D	Number of doses required	$B \times C$	549,147	549,147	0
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required including wastage	$D \times E$	576,605	576,605	0
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <i>Buffer on doses needed = (D - D of previous year original approved) x 0,25</i> <i>Buffer on doses wasted = (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25</i>	4,199	4,199	0
H	Stock to be deducted	<i>H2 of the previous year - 0.25 x F of the previous year</i>	107,548	107,548	0
H2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	<i>Rounding ((F + G - H) / vaccine pack size) x vaccine pack size</i>	473,400	473,400	0
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	490,378	490,378	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	0	0	0
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$	5,208	5,208	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	1,599,146	1,599,146	0
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	21,969	21,969	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	29	29	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	94,350	94,350	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	1,715,494	1,715,494	0
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	1,718,442		
V	Country co-financing % of GAVI supported proportion	$U / T$	100.00%		

**Table 7.11.4:** Calculation of requirements for **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID** (part 3)

	Formula	2017			
		Total	Government	GAVI	
A	Country co-financing	V	100.00%		
B	Number of children to be vaccinated with the first dose	Table 4	188,540	188,540	0
C	Number of doses per child	The immunization schedule	3		
D	Number of doses required	$B \times C$	565,620	565,620	0
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required including wastage	$D \times E$	593,901	593,901	0
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0,25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	141,611	141,611	0
H	Stock to be deducted	$H2 \text{ of the previous year} - 0,25 \times F \text{ of the previous year}$			
H2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	736,200	736,200	0
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	777,955	777,955	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	0	0	0
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$	8,099	8,099	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	2,447,129	2,447,129	0
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	34,853	34,853	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	45	45	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	146,828	146,828	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	2,628,855	2,628,855	0
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	2,628,234		
V	Country co-financing % of GAVI supported proportion	$U / T$	100.00%		

**Table 7.11.1: Characteristics for Rotavirus, 2 dose schedule**

ID	Source		2014	2015	2016	2017	2018	TOTAL
	Number of surviving infants	Parameter #	181,622	187,071	192,683	198,463	204,417	964,256
	Number of children to be vaccinated with the first dose	Parameter #	163,914	168,831	173,415	182,586	194,196	882,942
	Number of children to be vaccinated with the second dose	Parameter #	0	149,657	163,780	178,617	190,108	682,162
	Immunization coverage with the second dose	Parameter %	0.00%	80.00%	85.00%	90.00%	93.00%	
	Number of doses per child	Parameter #	2	2	2	2	2	
	Estimated vaccine wastage factor	Parameter #	1.05	1.05	1.05	1.05	1.05	
	Stock in Central Store Dec 31, 2014	Parameter #	85,850					
	Stock across second level Dec 31, 2014 (if available)*	Parameter #	85,850					
	Stock across third level Dec 31, 2014 (if available)*	Parameter #						
	Number of doses per vial	Parameter #		1	1	1	1	
	AD syringes required	Parameter #		No	No	No	No	
	Reconstitution syringes required	Parameter #		No	No	No	No	
	Safety boxes required	Parameter #		No	No	No	No	
cc	Country co-financing per dose	Parameter \$		1.01	1.43	1.84	2.26	
ca	AD syringe price per unit	Parameter \$		0.0448	0.0448	0.0448	0.0448	
cr	Reconstitution syringe price per unit	Parameter \$		0	0	0	0	
cs	Safety box price per unit	Parameter \$		0.0054	0.0054	0.0054	0.0054	
fv	Freight cost as % of vaccines value	Parameter %						

\* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

Not applicable

**Co-financing table for Rotavirus, 2 dose schedule**

Co-financing group	Graduating
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	2014	2015	2016	2017	2018
Minimum co-financing	0.48	1.01	1.43	1.84	2.36
Recommended co-financing as per APR 2013			1.43	1.84	2.36
Your co-financing	0.48	1.01	1.43	1.84	2.26

**Table 7.11.4:** Calculation of requirements for **Rotavirus, 2 dose schedule** (part 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-financing	V			
B	Number of children to be vaccinated with the first dose	Table 4	163,914	168,831	
C	Number of doses per child	The immunization schedule	2	2	
D	Number of doses required	$B \times C$	327,828	337,662	
E	Estimated vaccine wastage factor	Table 4	1.05	1.05	
F	Number of doses required including wastage	$D \times E$		354,546	
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0,25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$			
H	Stock to be deducted	$H_2 \text{ of the previous year} - 0,25 \times F \text{ of the previous year}$			
H <sub>2</sub>	Stock on 1st January	Table 7.11.1	0	85,850	
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		274,500	
J	Number of doses per vial	Vaccine parameter			
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$			
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$			
M	Total number of safety boxes required (10% extra)	$(K + L) / 100 \times 1.10$			
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$			
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$			
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$			
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$			
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$			
T	Total funds required	$(N+O+P+Q+R+S)$			
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$			
V	Country co-financing % of GAVI supported proportion	$U / T$			

**Table 7.11.4: Calculation of requirements for Rotavirus, 2 dose schedule (part 2)**

	Formula	2016			
		Total	Government	GAVI	
A	Country co-financing	V	63.39%		
B	Number of children to be vaccinated with the first dose	Table 4	173,415	109,922	63,493
C	Number of doses per child	The immunization schedule	2		
D	Number of doses required	$B \times C$	346,830	219,844	126,986
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required including wastage	$D \times E$	364,172	230,836	133,336
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0,25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	2,407	1,526	881
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$	0	0	0
H 2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	367,500	232,946	134,554
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	0	0	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	0	0	0
M	Total number of safety boxes required (10% extra)	$(K + L) / 100 \times 1.10$	0	0	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	829,080	525,525	303,555
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	0	0	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	0	0	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	0	0	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	829,080	525,525	303,555
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	525,525		
V	Country co-financing % of GAVI supported proportion	$U / T$	63.39%		

**Table 7.11.4: Calculation of requirements for Rotavirus, 2 dose schedule (part 3)**

	Formula	2017			
		Total	Government	GAVI	
A	Country co-financing	V	81.56%		
B	Number of children to be vaccinated with the first dose	Table 4	182,586	148,918	33,668
C	Number of doses per child	The immunization schedule	2		
D	Number of doses required	$B \times C$	365,172	297,836	67,336
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required including wastage	$D \times E$	383,431	312,728	70,703
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0,25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	91,523	74,647	16,876
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$			
H 2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	475,500	387,820	87,680
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	0	0	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	0	0	0
M	Total number of safety boxes required (10% extra)	$(K + L) / 100 \times 1.10$	0	0	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	1,072,728	874,920	197,808
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	0	0	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	0	0	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	0	0	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	1,072,728	874,920	197,808
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	874,920		
V	Country co-financing % of GAVI supported proportion	$U / T$	81.56%		

**Table 7.11.4:** Calculation of requirements for **Rotavirus, 2 dose schedule** (part 4)

	Formula	2018			
		Total	Government	GAVI	
A	Country co-financing	V	100.00%		
B	Number of children to be vaccinated with the first dose	Table 4	194,196	194,196	0
C	Number of doses per child	The immunization schedule	2		
D	Number of doses required	$B \times C$	388,392	388,392	0
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required including wastage	$D \times E$	407,812	407,812	0
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0,25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	97,389	97,389	0
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$			
H 2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	505,500	505,500	0
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	0	0	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	0	0	0
M	Total number of safety boxes required (10% extra)	$(K + L) / 100 \times 1.10$	0	0	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	1,140,408	1,140,408	0
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	0	0	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	0	0	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	0	0	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	1,140,408	1,140,408	0
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	1,142,430		
V	Country co-financing % of GAVI supported proportion	$U / T$	100.00%		



**Table 7.11.1: Characteristics for Yellow fever, 10 dose(s) per vial, LYOPHILIZED**

ID	Source		2014	2015	2016	TOTAL	
	Number of surviving infants	Parameter	#	181,622	187,071	192,683	561,376
	Immunization coverage	Parameter	%	93.00%	95.00%	90.00%	520,040
	Number of doses per child	Parameter	#	1	1	1	
	Estimated vaccine wastage factor	Parameter	#	1.25	1.25	1.25	
	Stock in Central Store Dec 31, 2014		#	1,890			
	Stock across second level Dec 31, 2014 (if available)*		#	1,890			
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#				
	Number of doses per vial	Parameter	#		10	10	
	AD syringes required	Parameter	#		Yes	Yes	
	Reconstitution syringes required	Parameter	#		Yes	Yes	
	Safety boxes required	Parameter	#		Yes	Yes	
cc	Country co-financing per dose	Parameter	\$		0.91	1.17	
ca	AD syringe price per unit	Parameter	\$		0.0448	0.0448	
cr	Reconstitution syringe price per unit	Parameter	\$		0	0	
cs	Safety box price per unit	Parameter	\$		0.0054	0.0054	
fv	Freight cost as % of vaccines value	Parameter	%		6.30%	6.30%	
fd	Freight cost as % of material value	Parameter	%				

\* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

Not applicable

### Co-financing table for Yellow fever, 10 dose(s) per vial, LYOPHILIZED

Co-financing group	Graduating
--------------------	------------

	2014	2015	2016
Minimum co-financing	0.65	0.88	1.29
Recommended co-financing as per APR 2013			1.29
Your co-financing	0.65	0.91	1.17

**Table 7.11.4:** Calculation of requirements for Yellow fever, 10 dose(s) per vial, LYOPHILIZED (part 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-financing	V			
B	Number of children to be vaccinated with the first dose	Table 4	168,908	177,717	
C	Number of doses per child	The immunization schedule	1	1	
D	Number of doses required	$B \times C$	168,908	177,717	
E	Estimated vaccine wastage factor	Table 4	1.25	1.25	
F	Number of doses required including wastage	$D \times E$		222,147	
G	Buffer stock of vaccines	<p><b>Buffer on doses needed + buffer on doses wasted</b>  <b>Buffer on doses needed</b> = <math>(D - D \text{ of previous year original approved}) \times 0,25</math>  <b>Buffer on doses wasted</b> = <math>(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25</math></p>			
H	Stock to be deducted	$H2 \text{ of the previous year} - 0,25 \times F \text{ of the previous year}$			
H <sub>2</sub>	Stock on 1st January	Table 7.11.1	41,500	1,890	
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		224,900	
J	Number of doses per vial	Vaccine parameter			
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$			
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$			
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$			
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$			
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$			
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$			
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$			
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$			
T	Total funds required	$(N+O+P+Q+R+S)$			
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$			
V	Country co-financing % of GAVI supported proportion	$U / T$			

**Table 7.11.4:** Calculation of requirements for Yellow fever, 10 dose(s) per vial, LYOPHILIZED (part 2)

		Formula	2016		
			Total	Government	GAVI
A	Country co-financing	V	100.00%		
B	Number of children to be vaccinated with the first dose	Table 4	173,415	173,415	0
C	Number of doses per child	The immunization schedule	1		
D	Number of doses required	$B \times C$	173,415	173,415	0
E	Estimated vaccine wastage factor	Table 4	1.25		
F	Number of doses required including wastage	$D \times E$	216,769	216,769	0
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <i>Buffer on doses needed = (D - D of previous year original approved) x 0,25</i> <i>Buffer on doses wasted = (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25</i>	- 175	- 175	0
H	Stock to be deducted	<i>H2 of the previous year - 0.25 x F of the previous year</i>	0	0	0
H 2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	<i>Rounding ((F + G - H) / vaccine pack size) x vaccine pack size</i>	216,600	216,600	0
J	Number of doses per vial	Vaccine parameter	10		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	190,565	190,565	0
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	23,827	23,827	0
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$	2,383	2,383	0
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	252,339	252,339	0
O	Cost of AD syringes required	$K \times \text{AD syringe price per unit (ca)}$	8,538	8,538	0
P	Cost of required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	834	834	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	13	13	0
R	Freight cost of required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	15,898	15,898	0
S	Freight cost of required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	277,622	277,622	0
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	253,422		
V	Country co-financing % of GAVI supported proportion	$U / T$	100.00%		

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## 8. Health System Strengthening Support (HSS)

Republic of Congo (Brazzaville) is not presenting a report on the use of funds for Health System strengthening (HSS) in 2015

## 9. Strengthen the involvement of Civil Society Organizations (CSO): type A and type B

### 9.1. TYPE A: Support to strengthen the coordination and representation of the CSOs

Republic of Congo (Brazzaville) **has NOT received GAVI Type A support to CSOs**

Republic of Congo (Brazzaville) will not present a report on GAVI Type A support to CSOs for 2014

## 9.2. TYPE B : CSO support to help implement the GAVI HSS proposal or CMYP

Republic of Congo (Brazzaville) **has NOT received GAVI Type B support to CSOs**

Republic of Congo (Brazzaville) will not present a report on GAVI Type B support to CSOs for 2014

## 10. Comments from ICC/HSCC Chairs

You can submit observations that you may wish to bring to the attention of the monitoring IRC and any comments or information you may wish to share in relation to the challenges you have encountered during the year under review. These are in addition to the approved minutes, which should be included in the attachments.

Not applicable



## 11. Appendices

### 11.1. Annex 1: ISS instructions

#### INSTRUCTIONS:

#### FINANCIAL STATEMENTS **FOR THE ALLOCATION OF NEW VACCINE INTRODUCTION UNDER IMMUNIZATION SERVICES SUPPORT (ISS)**

- I. All countries that have received ISS/ new vaccine introduction grants during the 2014 calendar year, or had balances of funding remaining from previously disbursed ISS/new vaccine introduction grants in 2014, are required to submit financial statements for these programs as part of their Annual Progress Reports.
- II. Financial statements should be compiled based on the countries' own national standards for accounting; as a consequence, GAVI will not provide countries with one single template with pre-determined cost categories.
- III. GAVI requires **at least** a simple statement of income and expenditure for activities conducted during the calendar year 2014, containing the points (a) through (f), below. A sample basic statement of income and expenditure is provided on the following page.
  - a. Funds carried forward from the 2013calendar year (opening balance as of 1 January 2014)
  - b. Income received from GAVI during 2014
  - c. Other income received during 2014 (interest, fees, etc.)
  - d. Total expenditure during the calendar year
  - e. Closing balance as of December 31, 2014
  - f. A detailed analysis of expenditures during 2014, based on your government's own system of economic classification. This analysis summarizes the total annual expenditure for the year by your Government's own economic classification system, and relevant cost categories (for example: salaries and wages). The cost categories used shall be based on the economic classification from your Government. Please report on the budget for each category at the beginning of the calendar year, actual expenditure during the calendar year, and the balance remaining for each cost category as of December 31, 2014(referred to as the "variance").
- IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular rate of exchange has been applied, and any supplementary notes that may help the GAVI Alliance in its review of the financial statements.
- V. Financial statements need not be audited/certified prior to their submission to GAVI. However, it is understood that these financial statements should be subjected to scrutiny during each country's external audit for the financial year 2014. Audits for ISS funds are to be submitted to the GAVI Secretariat 6 months following the close of the financial year in their respective countries.

## 11.2. Annex 2 - Example of ISS income & expenditure

### MINIMUM REQUIREMENT FOR **THE FINANCIAL STATEMENTS OF THE ISS** AND GRANT FOR THE INTRODUCTION OF A VACCIN 1

#### Example of the income and expenditure statement

Summary table of income and expenditure - GAVI ISS		
	Local currency (CFA)	Value in US\$*
Carryover from 2013 (balance as on 31December, 2013)	25,392,830	53,000
<b>Summary of income in 2014</b>		
Income from GAVI	57,493,200	120,000
Income from interest	7,665,760	16,000
Other income (fees)	179,666	375
<b>Total income</b>	<b>38,987,576</b>	<b>81,375</b>
<b>Total expenditure in 2014</b>	<b>30,592,132</b>	<b>63,852</b>
<b>Balance as on 31 December, 2014 (carryover to 2015)</b>	<b>60,139,325</b>	<b>125,523</b>

\* Indicate the exchange rate at the start of 01.01.2014, the exchange rate at the end of 31.12.2014, and also indicate the exchange rate used to convert the local currency into US\$ in these financial statements.

Detailed analysis of expenditure by economic classification** - GAVI ISS						
	Budget in CFA	Budget in US\$	Actual expenditure in CFA	Actual expenditure in US\$	Difference in CFA	Difference in US\$
<b>Expenditure on salaries</b>						
Salaries and wages	2,000,000	4,174	0	0	2,000,000	4,174
Daily allowances	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949
<b>Non-salary expenditure</b>						
Training	13,000,000	27,134	12,650,000	26,403	350,000	731
Fuel	3,000,000	6,262	4,000,000	8,349	-1,000,000	-2,087
Maintenance and general expenses	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131
<b>Other expenses</b>						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
<b>TOTAL FOR 2014</b>	<b>42,000,000</b>	<b>87,663</b>	<b>30,592,132</b>	<b>63,852</b>	<b>11,407,868</b>	<b>23,811</b>

\*\* The expenditure categories are indicative and included solely for demonstration purposes. Each government is to provide financial statements in accordance with their own system of economic classification.

### 11.3. Annex 3 - Instructions for HSS support

#### INSTRUCTIONS:

#### FINANCIAL STATEMENTS FOR **HEALTH SYSTEM STRENGTHENING (HSS)**

- I. All countries that have received HSS grants during the 2014 calendar year, or had balances of funding remaining from previously disbursed HSS grants in 2014, are required to submit a financial statement for these programs as part of their Annual Progress Reports.
- II. Financial statements should be compiled based on the countries' own national standards for accounting; as a consequence, GAVI will not provide countries with one single template with pre-determined cost categories.
- III. At a minimum, GAVI requires a simple statement of income and expenditure for activities carried out during the calendar year 2014, taking into account the points (a) through (f), below. A sample basic statement of income and expenditure is provided on the following page.
  - a. The carry-forward of funds from calendar year 2013 (opening balance as of 1 January 2014)
  - b. Income received from GAVI during 2014
  - c. Other income received during 2014 (interest, fees, etc.)
  - d. Total expenditure during the calendar year
  - e. Closing balance as of December 31, 2014
  - f. A detailed analysis of expenditures during 2014, based on your government's own system of economic classification. This analysis should summarize total annual expenditure for each HSS objective and activity, as per your government's originally approved HSS proposal, with further breakdown by cost category (for example: salaries and wages). The cost categories used shall be based on the economic classification from your Government. Please report the budget for each objective, activity and cost category at the beginning of the calendar year, the actual expenditure during the calendar year, and the balance remaining for each objective, activity and cost category as of December 31, 2014 (referred to as the "variance").
- IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular exchange rate has been applied, and any additional notes that may help the GAVI Alliance in its review of the financial statements.
- V. Financial statements need not have been audited/certified prior to their submission to GAVI. However, it is understood that these financial statements should be subjected to scrutiny during each country's external audit for the 2014 financial year. Audits for HSS funds are to be submitted to the GAVI Secretariat 6 months following the close financial year in respective countries.

## 11.4. Annex 4 - HSS income & expenditure example

### MINIMUM EXPENDITURE FOR FINANCIAL STATEMENTS OF THE HSS SUPPORT:

#### Example of the income and expenditure statement

Summary table of income and expenditure - GAVI ISS		
	Local currency (CFA)	Value in US\$*
Carryover from 2013 (balance as on 31 December 2013)	25,392,830	53,000
Summary table of income in 2014		
Income from GAVI	57,493,200	120,000
Income from interest	7,665,760	16,000
Other income (fees)	179,666	375
<b>Total income</b>	<b>38,987,576</b>	<b>81,375</b>
<b>Total expenditure in 2014</b>	<b>30,592,132</b>	<b>63,852</b>
<b>Balance as on 31 December, 2014 (carryover to 2015)</b>	<b>60,139,325</b>	<b>125,523</b>

\* Indicate the exchange rate at the start of 01.01.2014, the exchange rate at the end of 31.12.2014, and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed analysis of expenditure by economic classification** - GAVI HSS						
	Budget in CFA	Budget in US\$	Actual expenditure in CFA	Actual expenditure in US\$	Difference in CFA	Difference in US\$
Expenditure on salaries						
Salaries and wages	2,000,000	4,174	0	0	2,000,000	4,174
Daily allowances	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949
Non-salary expenditure						
Training	13,000,000	27,134	12,650,000	26,403	350,000	731
Fuel	3,000,000	6,262	4,000,000	8,349	-1,000,000	-2,087
Maintenance and general expenses	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131
Other expenses						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
<b>TOTAL FOR 2014</b>	<b>42,000,000</b>	<b>87,663</b>	<b>30,592,132</b>	<b>63,852</b>	<b>11,407,868</b>	<b>23,811</b>

\*\* The expenditure categories are indicative and included solely for demonstration purposes. Each Government is to provide financial statements in accordance with their own system of economic classification.

## 11.5. Annex 5 - Instructions for CSO support

### INSTRUCTIONS:

#### FINANCIAL STATEMENTS FOR SUPPORT TO CIVIL SOCIETY ORGANIZATIONS (CSO) TYPE B

- I. All countries that have received CSO - Type B grants during the 2014 calendar year, or had balances of funding remaining from previously disbursed CSO-Type B grants in 2014, are required to submit financial statements for these programs as part of their Annual Progress Report.
- II. Financial statements should be compiled based on the countries' own national standards for accounting; as a consequence, GAVI will not provide countries with one single template with pre-determined cost categories.
- III. At a minimum, GAVI requires a simple statement of income and expenditure for activities carried out during the calendar year 2014, taking into account the points (a) through (f), below. A sample basic statement of income and expenditure is provided on the following page.

- a. The carry-forward of funds from calendar year 2013(opening balance as of 1 January 2014)
  - b. Income received from GAVI during 2014
  - c. Other income received during 2014 (interest, fees, etc.)
  - d. Total expenditure during the calendar year
  - e. Closing balance as of December 31, 2014
  - f. A detailed analysis of expenditures during 2014, based on your government's own system of economic classification. This analysis should summarize total annual expenditure for each partner of the civil society, per your government's originally approved Type B support to CSOs, with further breakdown by cost category (for example: salaries and wages). The cost categories used shall be based on the economic classification from your Government. Please report the budget for each objective, activity and cost category at the beginning of the calendar year, the actual expenditure during the calendar year, and the balance remaining for each objective, activity and cost category as of December 31, 2014(referred to as the "variance").
- IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular exchange rate has been applied, and any additional notes that may help the GAVI Alliance in its review of the financial statements.
- V. Financial statements need not have been audited/certified prior to their submission to GAVI. However, it is understood that these financial statements should be subjected to scrutiny during each country's external audit for the 2014financial year. Audits for the Type B support to CSOs funds are to be submitted to the GAVI Secretariat 6 months following the close of the financial year in their respective countries.

## 11.6. Annex 6 - CSO income & expenditure example

### MINIMUM EXPENDITURE FOR **FINANCIAL STATEMENTS OF 'TYPE B' CSO:**

#### Example of the income and expenditure statement

Summary table of income and expenditure – GAVI CSOs		
	Local currency (CFA)	Value in US\$
Carryover from 2013 (balance as on 31 December 2013)	25,392,830	53,000
Summary table of income in 2014		
Income from GAVI	57,493,200	120,000
Income from interest	7,665,760	16,000
Other income (fees)	179,666	375
<b>Total income</b>	<b>38,987,576</b>	<b>81,375</b>
<b>Total expenditure in 2014</b>	<b>30,592,132</b>	<b>63,852</b>
<b>Balance as on 31 December 2014 (carryover to 2015)</b>	<b>60,139,325</b>	<b>125,523</b>

\* Indicate the exchange rate at the start of 01.01.2014, the exchange rate at the end of 31.12.2014, and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed analysis of expenditure by economic classification** - GAVI CSOs						
	Budget in CFA	Budget in US\$	Actual expenditure in CFA	Actual expenditure in US\$	Difference in CFA	Difference in US\$
Expenditure on salaries						
Salaries and wages	2,000,000	4,174	0	0	2,000,000	4,174
Daily allowances	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949
Non-salary expenditure						
Training	13,000,000	27,134	12,650,000	26,403	350,000	731
Fuel	3,000,000	6,262	4,000,000	8,349	-1,000,000	-2,087
Maintenance and general expenses	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131
Other expenses						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
<b>TOTAL for 2014</b>	<b>42,000,000</b>	<b>87,663</b>	<b>30,592,132</b>	<b>63,852</b>	<b>11,407,868</b>	<b>23,811</b>

\*\* The expenditure categories are indicative and included solely for demonstration purposes. Each Government is to provide financial statements in accordance with their own system of economic classification.

## 12. Attachments

Document Number	Document	Section	Mandatory	File
1	Signature of the Health Minister (or delegated authority)	2.1	✓	<a href="#">Rapport Réunion CCIA Approbation RSA 2014.doc</a> <b>File desc:</b> Signatures of the Min. of Health <b>Date/Time:</b> 05/15/2015 03: 11: 47 <b>Size:</b> 26 KB
2	Signature of the Finance Minister (or delegated authority)	2.1	✓	<a href="#">Rapport Réunion CCIA Approbation RSA 2014.doc</a> <b>File desc:</b> Signatures of the Min. of Finance <b>Date/Time:</b> 05/15/2015 03: 11: 09 <b>Size:</b> 26 KB
3	Signatures of the ICC members	2.2	✓	<a href="#">Rapport Réunion CCIA Approbation RSA 2014.doc</a> <b>File desc:</b> Signatures of the Min. of Health <b>Date/Time:</b> 05/15/2015 03: 10: 27 <b>Size:</b> 26 KB
4	Minutes of the ICC meeting in 2015 endorsing the Annual Progress Report 2014.	5.4	✓	<a href="#">Rapport Réunion CCIA Approbation RSA 2014.doc</a> <b>File desc:</b> ICC Report 2015 <b>Date/Time:</b> 05/15/2015 02: 59: 26 <b>Size:</b> 26 KB
5	Signature of the HSCC members	2.3	✗	No file downloaded
6	Minutes of the HSCC meeting in 2015 endorsing the Annual Progress Report 2014	8.9.3	✓	<a href="#">Rapport Réunion CCIA Approbation RSA 2014.doc</a> <b>File desc:</b> ICC Meeting Report 2015 <b>Date/Time:</b> 05/15/2015 02: 59: 26 <b>Size:</b> 26 KB
7	Financial statements for the ISS funds (fiscal year 2014) signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health	6.2.1	✗	No file downloaded
8	External audit report on the allocation of ISS funds (fiscal year 2014)	6.2.3	✗	No file downloaded
9	Post-introduction Evaluation Report	7.2.1	✗	No file downloaded

10	Financial statements of grants for introducing a new vaccine (fiscal year 2014) signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health	7.3.1	✓	<a href="#">Etat Financier Allocation SVN 2014.pdf</a> <b>File desc:</b> Financial status of the grant for the introduction of a new vaccine. <b>Date/Time:</b> 05/15/2015 03: 03: 15 <b>Size:</b> 1 MB
11	External audit report for the allocation of funds for the introduction of a new vaccine (fiscal year 2014), if the total expenses in 2014 are greater than USD 250,000	7.3.1	✓	<a href="#">Rapport Audit SVN Congo 2014.doc</a> <b>File desc:</b> NVS 2014, Audit Report <b>Date/Time:</b> 05/15/2015 02: 54: 47 <b>Size:</b> 26 KB
12	Latest EVSM/EVM/VMA report	7.5	✓	<a href="#">Rapport EVM 2010 vs finale.doc</a> <b>File desc:</b> EVM Report, Congo 2010 <b>Date/Time:</b> 05/15/2015 02: 26: 09 <b>Size:</b> 386 KB
13	Latest EVSM/EVM/VMA improvement plan	7.5	✓	<a href="#">Plan d'amélioration de la gestion des vaccins.2012-2013.doc</a> <b>File desc:</b> EVM improvement plan 2013 <b>Date/Time:</b> 05/15/2015 02: 42: 31 <b>Size:</b> 125 KB
14	Status of the implementation of EVSM/EVM/VMA improvement plan	7.5	✓	<a href="#">Rapport Mise en oeuvre GEV RAS 2014.doc</a> <b>File desc:</b> Implementation status for EVM 2014 <b>Date/Time:</b> 05/15/2015 02: 35: 32 <b>Size:</b> 94 KB
16	The valid cMYP, if the country is requesting an extension of support	7.8	✓	<a href="#">PPAC 2012-2016 CONGO.doc</a> <b>File desc:</b> CMYP Congo 2012-2016 <b>Date/Time:</b> 05/15/2015 02: 19: 40 <b>Size:</b> 2 MB
17	The costing tool for the valid cMYP, if the country is requesting an extension of support.	7.8	✓	<a href="#">CONGO cMYP Costing Tool Vs 2 6 Fr 2012-2016.xls</a> <b>File desc:</b> Costing CMYP Congo 2012-2016 <b>Date/Time:</b> 15/05/2015 01: 59: 36 <b>Size:</b> 3 MB
18	Minutes of the ICC meeting approving the extension of vaccine support, if applicable	7.8	✓	<a href="#">Rapport Réunion CCIA Approbation RSA 2014.doc</a> <b>File desc:</b> Signatures of the Min. of Finance <b>Date/Time:</b> 05/15/2015 03: 05: 41 <b>Size:</b> 26 KB
19	Financial statements for the HSS funds (fiscal year 2014) signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health.	8.1.3	✗	No file downloaded
20	Financial statements for the HSS funds for the period January-April 2015 signed by the Chief Accountant or by the Permanent Secretary of the Ministry of Health.	8.1.3	✗	No file downloaded



21	External audit report on the allocation of HSS funds (fiscal year 2014)	8.1.3	X	No file downloaded
22	Review report of the health sector-HSS	8.9.3	X	No file downloaded
23	Census report - Type A CSO support	9.1.1	X	No file downloaded
24	Financial statement for the allocation of Type B support to CSOs (fiscal year 2014)	9.2.4	X	No file downloaded
25	External audit report on the Type B support to CSOs (fiscal year 2014)	9.2.4	X	No file downloaded
26	Bank statements for each program funded in cash or a cumulative bank statement for all programs funded in cash, if funds are kept in the same bank account, where the opening and closing balance for the year 2014 as of i) January 1, 2014 and ii) as of December 31, 2014 are given.	0	✓	<a href="#">Relevé bancaire 31-12-2012 au 14-08-2014.pdf</a> <b>File desc:</b> Bank Statement 2014 EPI Congo <b>Date/Time:</b> 05/15/2015 03: 57: 24 <b>Size:</b> 4 MB
27	Minutes of ICC meeting endorsing change of vaccine presentation	7.7	X	No file downloaded
28	Explanation for changes in target population	5.1	X	No file downloaded
	Other documents		X	No file downloaded