

GAVI Alliance

# Annual Progress Report **2014**

submitted by

## the Government of *São Tome and Principe*

Reporting year: **2014**

Support application for the year: **2016**

Date of presentation: **06/22/2015**

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

Please submit the Annual Progress Report **2014** via the online platform

<https://AppsPortal.gavialliance.org/PDExtranet>

Please write all 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
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New Vaccines Support (routine immunization)	Measles second dose, 10 dose(s) per vial, LYOPHILIZED	Measles second dose, 10 dose(s) per vial, LYOPHILIZED	2015
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, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	2015
New Vaccines Support (routine immunization)	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	2015

**DTP-HepB-Hib (Pentavalent)** vaccine: based on the current preferences of your country, the vaccine is available through UNICEF in liquid form in vials of one or ten doses and in liquid/lyophilized form in two-dose vials to be used with 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 confirmed specifically.

## 1.2. Extension of the Program

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

## 1.3. ISS, HSS, CSO support

There is no ISS, HSS or CSOs this year

## 1.4. Previous IRC Report

No IRC report was produced for Sao Tome and Principe 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 **Sao Tome and Principe** 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 **Sao Tome and Principe**

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	Maria de Jesus Trovoada dos Santos	Name	Americo d'Oliveira Ramos
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):

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### 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 pages of the attached documents twice, once for HSCC signatures and once for ICC signatures**

The GAVI Alliance Transparency and Accountability Policy is an integral part of the GAVI Alliance's monitoring of the country's results. 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
Maria de Jesus Trovoada dos Santos	Ministry of Health		
Vera Fatima Nazaré	Ministry of Finance and Admin Public		
Sleid Costa	Min. of Economy and International Cooperation		
Ana de Deus Botelho	Ministry of Health		
Manuela Ferreira	Director of Health Care		
Vladimir Sousa	Logician EPI_STP		
Leonel Carvalho	Director of Cabinet, Ministry of Health		
Elisabeth Carvalho	EPI Manager		
António Marques Lima	Minister Saúde		
Victoria d'Alva	UNFPA		
Fernando Vaz das Neves	WHO		
Edgar Neves	Institut Valle Flor		

Alberto Neto	Cruz Vermelha		
José Manuel Carvalho	UNFPA		
Luís Bonfim	UNICEF		

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

Observations of the Regional Working Group:

### 2.3. HSCC Signatures Page

Sao Tome and Principe has not produced 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

Sao Tome and Principe does not present the report on use of CSO funds (Type A and B) in 2015

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## 4. Baseline data and annual targets

Countries are requested to make a realistic evaluation of vaccine wastage, supported 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	
	Original approved target in accordance with the Decision Letter	Reported	Original approved target in accordance with the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates
Total number of births	6,016	5,828	6,139	6,139		6,301
Total number of infant deaths	177	170	183	183		196
Total number of surviving infants	5839	5,658	5,956	5,956		6,105
Total number of pregnant women	6,901	6,867	7,039	7,039		7,483
Number of infants who received (should receive) <b>BCG vaccine</b>	6,016	5,707	6,139	6,139		6,301
<b>BCG coverage[1]</b>	100%	98%	100%	100%	0%	100%
Number of infants who received (should receive) <b>OPV3 vaccine</b>	5,722	5,501	5,837	5,837		6,104
<b>OPV3 coverage[2]</b>	98%	97%	98%	98%	0%	100%
Number of infants who received (should receive) <b>DTP1 vaccine[3]</b>	5,781	5,691	5,896	5,896		6,104
Number of infants who received (should receive) the <b>DTP3 vaccine [3][4]</b>	5,722	5,501	5,837	5,837		5,981
<b>DTP3 coverage[2]</b>	98%	97%	98%	98%	0%	98%
Wastage [5] rate during the reference year and anticipated thereafter (%) for the <b>DTP vaccine</b>	4	1	4	4		4
Wastage [5] factor during the reference year and anticipated thereafter for the <b>DTP vaccine</b>	1.04	1.01	1.04	1.04	1.00	1.04
Number of infants who received (should receive) the <b>1<sup>st</sup> dose of DTP-HepB-Hib vaccine</b>	5,781	5,691	5,896	5,896		6,104
Number of infants who received (should receive) the <b>3<sup>rd</sup> dose of DTP-HepB-Hib vaccine</b>	5,781	5,501	5,896	5,896		5,981
<b>DTP-HepB-Hib coverage [2]</b>	99%	97%	99%	99%	0%	98%
Wastage [5] rate in the base-year and planned thereafter (%)	5	1	5	5		5

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)			
	2014		2015		2016	
	Original approved target in accordance with the Decision Letter	Reported	Original approved target in accordance with the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates
Wastage [5] factor in the base-year and planned thereafter (%)	1.05	1.01	1.05	1.05	1	1.05
Maximum loss rate for DTP-HepB-Hib vaccine, 1 dose(s) per vial, LIQUID	0%	5%	0%	5%	0%	5%
Number of infants who received (should receive) Yellow fever vaccine	5,722	5,352	5,722	5,722		5,859
Yellow fever coverage[2]	98%	95%	96%	96%	0%	96%
Wastage [5] rate in the base-year and planned thereafter (%)	40	23	5	5		20
Wastage [5] factor in the base-year and planned thereafter (%)	1.67	1.3	1.05	1.05	1	1.25
Maximum wastage rate for Yellow fever vaccine, 10 dose(s) per vial, LYOPHILIZED	0%	40%	0%	40%	0%	40%
Number of infants who received (should receive) the 1 <sup>st</sup> dose of Pneumococcal (PCV13) vaccine	5,781	5,691	5,781	5,896		6,104
Number of infants who received (should receive) the 3 <sup>rd</sup> dose(s) of Pneumococcal (PCV13) vaccine	5,781	5,501	0	5,896		5,981
Pneumococcal (PCV13) coverage[2]	99%	97%	0%	99%	0%	98%
Wastage [5] rate in the base-year and planned thereafter (%)	5	2	5	5		5
Wastage [5] factor in the base-year and planned thereafter (%)	1.05	1.02	1.05	1.05	1	1.05
Maximum wastage rate for Pneumococcal (PCV13) vaccine, 1 dose(s) per vial, LIQUID	0%	5%	0%	5%	0%	5%
Number of infants who received (should receive) the 1 <sup>st</sup> dose of Measles Vaccine	0	5,352	4,671	4,671		5,859
Number of infants who received (should receive) 2 <sup>nd</sup> dose(s) of Measles Vaccine	4,671	4,156	4,765	4,765		4,883
Measles coverage [2]	80%	73%	80%	80%	0%	80%
Wastage [5] rate in the base-year and planned thereafter (%)	20	23	20	20		20
Wastage [5] factor in the base-year and planned thereafter (%)	1.25	1.3	1.25	1.25	1	1.25

Number	Preparation of joint report from the WHO/UNICEF		Targets (Preferred presentation format)			
	2014		2015		2016	
	Original approved target in accordance with the Decision Letter	Reported	Original approved target in accordance with the Decision Letter	Current estimates	Previous estimates in 2014	Current estimates
<b>Maximum wastage rate for second dose of Measles Vaccine, 10-dose(s) per vial, LYOPHILIZED</b>	0.00%	40.00%	0.00%	40.00%	0.00%	40.00%
<b>Pregnant women immunized with TT+</b>	6,750	5,642	6,885	6,885		7,483
<b>TT+ coverage[7]</b>	98%	82%	98%	98%	0%	100%
<b>Vit A supplement to mothers within 6 weeks of the delivery</b>	6,544	6,226	6,675	6,675		6,910
<b>Vit A supplement to infants older than 6 months</b>	18,868	20,689	19,396	19,396	N/A	22,487
<b>Annual DTP Drop out rate [(DTP1–DTP3)/DTP1] x100</b>	1%	3%	1%	1%	0%	2%

[1] Number of infants immunized compared to the number of births

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

[3] Indicate total number of children vaccinated with either the DTP vaccine alone or combined with others

[4] Please ensure that the DTP3 cells are correctly filled in

[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) for immunization programs 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 an explanation of the figures in this APR that are different from those in the reference documents:

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

There have been no changes

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

There have been no changes

- 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.**

The loss rate of BCG, Measles and Yellow Fever are higher than 10%, because they are lyophilized vaccines and the target population is too small. To maintain the coverage, it's not possible to have a loss rate less than 10%.

The coverage of BCG at birth declined from 97% to 95% because the country does everything to reduce the rate of loss of the vaccine, but unfortunately detrimental to our children (One must consider the population size which is small to increase the amount of vaccines to resume the open vial policy).

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

For lyophilized vaccines (BCG, Measles, Yellow Fever and Td) the Country practices the open vial policy

### 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? **Not selected**

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

Data Source	Year of reference for estimation	DTP3 coverage estimate	
		Boys	Girls
PRS	2014	2781 (51%)	2720 (49%)

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

There are no vaccine coverage data gap issues. This affirmation is confirmed by the Demographic Health Survey (DHS 2009) which demonstrated that there isn't any difference statistically between the survey data and the administrative data.

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 the gender-related barriers at the access and at the implementation of immunization services (for example, mothers having no access to the services, the gender of service provider of services, 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/>)

N/A

### 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 complete the table using US\$.

<b>Exchange rate used</b>	1 US\$ = 18491	Only enter the exchange rate; do not enter the name of the local currency
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**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	0	0	0
Traditional vaccines*	10,147	0	0	10,147	0	0	0	0
New and Under-used Vaccines (NVS)**	172,386	14,468	157,918	0	0	0	0	0
Injection material (AD syringes and others)	4,290	0	2,576	1,714	0	0	0	0
Cold Chain equipment	0	0	0	0	0	0	0	0
Staff	2,848	2,848	0	0	0	0	0	0
Other routine recurrent costs	576,181	466,761	69,420	0	40,000	0	0	0
Other Capital Costs	0	0	0	0	0	0	0	0
Campaigns costs	0	0	0	0	0	0	0	0
N/A		0	0	0	0	0	0	0
<b>Total Expenditures for Immunization</b>	<b>765,852</b>							
<b>Total Government Health expenditures</b>		<b>484,077</b>	<b>229,914</b>	<b>11,861</b>	<b>40,000</b>	<b>0</b>	<b>0</b>	<b>0</b>

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? **3**

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

List the principal 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](#)

- 1- The Country should make efforts necessary to create the National Regulatory Authority
- 2- The Government will have to provide their share of co-financing required for the purchase of vaccines to avoid stockouts and not to compromise the country's credibility.

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

List CSO members of the ICC:
NGO – Instituto Marquês Valle Flor (IMVF)
Rotary Club of São Tomé
National Red Cross

## 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?

Strengthen advocacy for increasing the State Budget assigned for healthcare  
 Train the staff at health facilities on immunization and in MLM  
 Order for Equipment and supplies for the Cold Chain  
 Construct incinerators at national level  
 Review and validate the training modules for IPV  
 Develop the implementation plan (MAPI, Logistics & communication)  
 Train staff at the central and district levels  
 Prepare a communication plan for the IPV introduction  
 Organize the training on AEFI management  
 Proceed with the official IPV introduction launch  
 Conduct supervisory missions  
 Procure 4 extinguishers for the Central Depot  
 Acquire 4 warm outfits for the staff at the central depot  
 Establish traceability of batches of vaccines and injection materials by implementing purchase orders and receipts of vaccines and all other inputs as well as stock managements registers all levels.  
 Recruit and train a warehouse manager so that the logistician could concentrate on other activities.  
 Establish a National Regulation Authority (NRA) to approve the batches of vaccines entering the country  
 Develop and display an emergency plan for the management of delayed and/or late arrival of vaccines at the airport

## 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 for Injection Safety equipment in 2014

Vaccine	Types of syringes used in the 2014 routine EPI	Funding sources in 2014
FR BCG	AD syringes 0.05 ml; SD 2ml	UNICEF
FR Measles	AD syringes 0.5 ml; SD 5ml	UNICEF
FR TT	AD syringes 0.5 ml	UNICEF
FR DTP-containing vaccine		
IPV		

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

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

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

Please explain how sharps have been eliminated in 2014, what were the problems faced, etc.

Occupants' wastes are collected in safety boxes that are incinerated in especially dug pits and buried.

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

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

Sao Tome and Principe is not reporting on the use of Immunization Services Support (ISS) funds in 2014

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

Sao Tome and Principe is not reporting on the use of Immunization Services Support (ISS) funds in 2014

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

The request for the expected ISS reward is not applicable for 2014 in Sao Tome and Principe



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

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

7.1.1. Did you receive the approved amount of vaccine doses for the immunization program in 2014 that GAVI specified 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 against this same Decision Letter.

	[ A ]	[ B ]	[ C ]	
Vaccine Type	Total doses for 2014 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 stock-out at any level in 2014?
Measles second dose	5,900	5,900	4,800	No
Pneumococcal (PCV13)	18,500	16,200	16,745	No
DTP-HepB-Hib	18,500	17,740	17,458	No
Yellow fever	9,300	9,300	6,930	No

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 the VVM changed color or because of the expiry date?)

N/A

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

**GAVI would also appreciate feedback from countries on feasibility and interest of selecting and being shipped multiple Pentavalent vaccine presentations (1 dose and 10 dose vials) so as to optimize wastage, coverage and cost.**

Given the target population of our country, we hope to continue with single dose vials to avoid the higher rate of vaccine loss.

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

N/A

### 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 proposal approved and report on progress.

Yellow fever, 10 dose(s) per vial, LYOPHILIZED		
Nationwide introduction	Yes	10/10/2003
Phased introduction	No	

Was the time and scale of the introduction as planned in the proposal? If No, Why ?	Yes	N/A
---	-----	-----

When do you plan to conduct a Post introduction evaluation (PIE)? **November 2004**

<b>Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID</b>		
Nationwide introduction	Yes	30/10/2012
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	N/A

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

<b>Measles second dose, 10 dose(s) per vial, LYOPHILIZED</b>		
Nationwide introduction	Yes	30/11/2013
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	N/A

When is the Post introduction evaluation (PIE) planned? **December 2014**

<b>DTP-HepB-Hib, 1 dose(s) per vial, LIQUID</b>		
Nationwide introduction	Yes	30/10/2009
Phased introduction	No	
Was the time and scale of the introduction as planned in the proposal? If No, Why ?	No	N/A

When is the Post introduction evaluation (PIE) planned? **December 2010**

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)

A post-introduction evaluation of the second dose of measles was conducted in December 2014. The implementation plan works for the recommendations of this evolution were integrated in the action plan for 2015

7.2.3. Adverse Events Following Immunization (AEFI)

Is there a national system dedicated to vaccinal pharmacovigilance? **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? **Yes**

b. bacterial meningitis or pneumococcal or meningococcal disease in children? **No**

Has your country conducted special studies on:

a. Rotavirus diarrhea? **Yes**

b. bacterial meningitis or pneumococcal or meningococcal disease in children? **No**

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

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

Please describe the results of monitoring/special studies and NITAG/ICC contributions:

N/A

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

#### 7.3.1. Financial Management Report

	Amount in US\$	Amount in local currency
Funds received in 2014 (A)	0	0
Balance of funds carried forward from 2013	0	0
Total Available Funds in 2014 (C=A+B)	0	0
Total expenditure in 2014(D)	0	0
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.

N/A

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

N/A

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

Maintain the cold room and equipment at all levels

Vehicle maintenance

Acquiring fuel

## 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	7,619	7,300
Selected vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	3,465	1,050
Selected vaccine #3: Measles second dose, 10 dose(s) per vial, LYOPHILIZED	0	0
Selected vaccine #4: DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	3,384	1,440
Q.2: What were the shares of country co-financing during the reporting year 2014 from the following sources?		
Government	14,468	
Donor	157,919	
Others		
Q.3: Did you procure related injection supplies for the co-financing vaccines? What were the amounts in US\$ and in supplies?		
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: Measles second dose, 10 dose(s) per vial, LYOPHILIZED	0	0
Selected vaccine #4: DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	0	0
Q.4: When do you intend to transfer funds for co-financing in 2016 and what is the expected source of this funding?		
Schedule of Co-Financing Payments	Proposed Payment Date for 2016	Funding source
Selected vaccine #1: Yellow fever, 10 dose(s) per vial, LYOPHILIZED	June	GAVI/Government

Selected vaccine #2: <b>Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID</b>	June	GAVI/Government
Selected vaccine #3: <b>Measles second dose, 10 dose(s) per vial, LYOPHILIZED</b>	June	GAVI/Government
Selected vaccine #4: <b>DTP-HepB-Hib, 1 dose(s) per vial, LIQUID</b>	June	GAVI/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 a health economist for developing sustainable financing strategies and revamping the cMYP Training of health workers on resource mobilization	

\***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 VMA is valid for a period of three years.*

When was the latest Effective Vaccine Management (EVM) or an alternative assessment (EVSM/VMA) carried out? **January 2015**

Please attach the following documents:

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

Progress reports on the EVM/EVSM/VMA Improvement Plan' is a mandatory requirement

Are there any changes in the Improvement plan? If so, what were the reasons? **Yes**

If yes, provide more details

The country conducted a EVM in 2011, whose criteria rating compares to the current data shown in the attached documents.

When is the next Effective Vaccine Management (EVM) assessment planned? **January 2018**

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

Sao Tome and Principe is not submitting a prevention campaign NVS report.

## 7.7. Change in vaccine presentation

Sao Tome and Principe 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 2016 for the following vaccines:

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Measles second dose, 10 dose(s) per vial, LYOPHILIZED**
- \* **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**

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 summarised in section [7.11 Calculation of requirements](#).

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Measles second dose, 10 dose(s) per vial, LYOPHILIZED**
- \* **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**

The multi-year support extension is in line with the new cMYP for the years 2016 to 2016, which is attached to this APR (Document N°16). The new costing tool is also attached (Document No. 17) for the following vaccines:

- \* **Yellow fever, 10 dose(s) per vial, LYOPHILIZED**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- \* **Measles second dose, 10 dose(s) per vial, LYOPHILIZED**
- \* **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**

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**
- \* **Measles second dose, 10 dose(s) per vial, LYOPHILIZED**
- \* **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**

## 7.9. Request for continued support for vaccines for 2016 immunization program

In order to request NVS for vaccination in 2016 do the following:

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

If you do not confirm, please explain:

## 7.10. Weighted average prices of supplies 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							
Measles second dose, 10 dose(s) per vial, LYOPHILIZED	Measles second dose, 10 dose(s) per vial, LYOPHILIZED							
DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID							

Vaccine Antigens	Vaccine Type	2014	2015	2016
Yellow fever, 10 dose(s) per vial, LYOPHILIZED	Yellow fever, 10 dose(s) per vial, LYOPHILIZED	7.50%	7.50%	7.40%
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	4.40%	4.50%	3.00%
Measles second dose, 10 dose(s) per vial, LYOPHILIZED	Measles second dose, 10 dose(s) per vial, LYOPHILIZED	13.80%	13.00%	12.60%
DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	3.40%	3.50%	3.60%

## 7.11. Calculation of requirements

**Table 7.11.1:** Characteristics for DTP-HepB-Hib, 1 dose(s) per vial, LIQUID

ID	Source		2014	2015	2016	TOTAL	
	Number of surviving infants	Parameter	#	5,839	5,956	6,105	17,900
	Number of children to be vaccinated with the first dose	Parameter	#	5,781	5,896	6,104	17,781
	Number of children to be vaccinated with the third dose	Parameter	#	5,781	5,896	5,981	17,658
	Immunization coverage with the third dose	Parameter	%	99.01%	98.99%	97.97%	

	Number of doses per child	Parameter	#	3	3	3
	Estimated vaccine wastage factor	Parameter	#	1.05	1.05	1.05
	Stock in Central Store Dec 31, 2014		#	6,200		
	Stock across second level Dec 31, 2014 (if available)*		#			
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#			
	Number of doses per vial	Parameter	#		1	1
	Number of AD syringes required	Parameter	#		Yes	Yes
	Number of reconstitution syringes required	Parameter	#		No	No
	Number of safety boxes required	Parameter	#		Yes	Yes
cc	Country co-financing per dose	Parameter	\$		0.30	0.35
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	%		3.50%	3.60%

\* 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.

No difference

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**

### Co-financing table for DTP-HepB-Hib, 1 dose(s) per vial, LIQUID

Co-financing group	Intermediate
--------------------	--------------

	2014	2015	2016
Minimum co-financing	0.26	0.30	0.35
Recommended co-financing as per			0.35
Your co-financing	0.26	0.30	0.35



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

		2014	2015	2016
Number of vaccine doses	#	16,300	17,400	14,900
Number of AD syringes	#	17,100	18,400	15,500
Number of reconstitution syringes	#	0	0	0
Number of safety boxes	#	200	225	175
Total value to be co-financed by GAVI	\$	36,000	36,500	28,500

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

		2014	2015	2016
Number of vaccine doses	#	2,200	3,000	3,400
Number of AD syringes	#	2,300	3,100	3,500
Number of reconstitution syringes	#	0	0	0
Number of safety boxes	#	50	50	50
Total value of country co-financing[1]	\$	5,000	6,500	6,500

**Table 7.11.4:** Calculation of requirements for **DTP-HepB-Hib, 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	5,781	5,896	
B 1	Number of children to be vaccinated with the third dose	Table 4	5,781	5,896	
C	Number of doses per child	The immunization schedule	3	3	
D	Number of doses required	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	17,343	17,688	
E	Estimated vaccine wastage factor	Table 4	1.05	1.05	
F	Number of doses required taking wastage into account	$D \times E$		18,573	
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</math>  <math>\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	4,678	6,200	
H 3	Dispatch schedule	Approved volume		20,400	
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		20,400	
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 the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of the 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 the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$			

<b>S</b>	<b>Freight cost of the 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 delivery schedule for 2014 is not yet available, the volume approved for 2014 is used as the best estimate of the delivery schedule in 2014. The information will be updated when the delivery schedule is available.

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

	Formula	2016			
		Total	Government	GAVI	
A	Country co-financing	V	18.34%		
B	Number of children to be vaccinated with the first dose	Table 4	6,104	1,120	4,984
B1	Number of children to be vaccinated with the third dose	Table 4	5,981	1,097	4,884
C	Number of doses per child	The immunization schedule	3		
D	Number of doses required	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	18,139	3,327	14,812
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required taking wastage into account	$D \times E$	19,046	3,493	15,553
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>	178	33	145
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0,375)$	1,064	196	868
H1	Initial stock calculated	$H2 (2015) + H3 (2015) - F (2015)$	8 028	1,473	6,555
H2	Stock on 1st January	Table 7.11.1			
H3	Dispatch schedule	Approved volume			
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	18,200	3,338	14,862
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	18,979	3,481	15,498
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)	$(I / 100) \times 1.10$	201	37	164
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	32,706	5,998	26,708
O	Cost of the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$	851	157	694
P	Cost of the required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	2	1	1
R	Freight cost of the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	1,178	217	961
S	Freight cost of the required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	34,737	6,370	28,367

<b>U</b>	<b>Total country co-financing</b>	<i>I x Country co-financing per dose (cc)</i>	6,370		
<b>V</b>	<b>Country co-financing % of GAVI supported proportion</b>	<i>U/T</i>	18.34%		

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

**Table 7.11.1: Characteristics for Measles second dose, 10 dose(s) per vial, LYOPHILIZED**

ID		Source		2014	2015	2016	TOTAL
	Number of surviving infants	Parameter	#	5,839	5,956	6,105	17,900
	Number of children to be vaccinated with the first dose	Parameter	#	0	4,671	5,859	10,530
	Number of children to be vaccinated with the second dose	Parameter	#	4,671	4,765	4,883	14,319
	Immunization coverage with the second dose	Parameter	%	80.00%	80.00%	79.98%	
	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		#	21,710			
	Stock across second level Dec 31, 2014 (if available)*		#				
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#				
	Number of doses per vial	Parameter	#		10	10	
	Number of AD syringes required	Parameter	#		Yes	Yes	
	Number of reconstitution syringes required	Parameter	#		Yes	Yes	
	Number of safety boxes required	Parameter	#		Yes	Yes	
cc	Country co-financing per dose	Parameter	\$		0.00	0.00	
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	%		13.00%	12.60%	
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.

No difference

**Co-financing table for Measles second dose, 10 dose(s) per vial, LYOPHILIZED**

Co-financing group	Intermediate
--------------------	--------------

	2014	2015	2016
Minimum co-financing			
Recommended co-financing as per			
Your co-financing			

**Table 7.11.4:** Calculation of requirements for **Measles second dose, 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 second dose	Table 4	4,671	4,765	
C	Number of doses per child	The immunization schedule	1	1	
D	Number of doses required	$B \times C$	0	4,671	
E	Estimated vaccine wastage factor	Table 4	1.25	1.25	
F	Number of doses required taking wastage into account	$D \times E$		5,839	
G	Buffer stock of vaccines	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = (D - D of previous year original approved) x 0,25 <b>Buffer on doses wasted</b> = (F - D) x [XXX] - ((F - D) of previous year current estimate) x 0,25			
H	Stock to be deducted	H2 of the previous year - 0.25 x F of the previous year			
H2	Stock on 1st January	Table 7.11.1	0	21,710	
I	Total vaccine doses required	Rounding ((F + G - H) / vaccine pack size) x vaccine pack size		1,800	
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 the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of the 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 the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$			
S	Freight cost of the 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 **Measles second dose, 10 dose(s) per vial, LYOPHILIZED**  
(part 2)

		Formula	2016		
			Total	Government	GAVI
A	Country co-financing	V	0.00%		
B	Number of children to be vaccinated with the second dose	Table 4	4,883	0	4,883
C	Number of doses per child	The immunization schedule	1		
D	Number of doses required	$B \times C$	5,859	0	5,859
E	Estimated vaccine wastage factor	Table 4	1.25		
F	Number of doses required taking wastage into account	$D \times E$	7,324	0	7,324
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> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	372	0	372
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$	20,251	0	20,251
H <sub>2</sub>	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	- 12,500	0	- 12,500
J	Number of doses per vial	Vaccine parameter	10		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	- 15,422	0	- 15,422
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	- 1,375	0	- 1,375
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$	- 137	0	- 137
N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	- 3,362	0	- 3,362
O	Cost of the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$	- 690	0	- 690
P	Cost of the required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	- 48	0	- 48
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	0	0	0
R	Freight cost of the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	- 423	0	- 423
S	Freight cost of the required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	- 4,523	0	- 4,523
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00%		

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

ID		Source		2014	2015	2016	TOTAL
	<b>Number of surviving infants</b>	Parameter	#	5,839	5,956	6,105	17,900
	<b>Number of children to be vaccinated with the first dose</b>	Parameter	#	5,781	5,781	6,104	17,666
	<b>Number of children to be vaccinated with the third dose</b>	Parameter	#	5,781	0	5,981	11,762

	<b>Immunization coverage with the third dose</b>	Parameter	%	99.01%	0.00%	97.97%
	<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>		#	11,631		
	<b>Stock across second level Dec 31, 2014 (if available)*</b>		#			
	<b>Stock across third level Dec 31, 2014 (if available)*</b>	Parameter	#			
	<b>Number of doses per vial</b>	Parameter	#		1	1
	<b>Number of AD syringes required</b>	Parameter	#		Yes	Yes
	<b>Number of reconstitution syringes required</b>	Parameter	#		No	No
	<b>Number of safety boxes required</b>	Parameter	#		Yes	Yes
cc	<b>Country co-financing per dose</b>	Parameter	\$		0.30	0.35
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	%		4.50%	3.00%

\* 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.

No difference

### Co-financing table for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID

	2014	2015	2016
<b>Minimum co-financing</b>	0.26	0.30	0.35
<b>Recommended co-financing as per</b>			0.35

<b>Your co-financing</b>		0.26	0.30	0.35
<b>Co-financing group</b>	Intermediate			

**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	5,781	5,781	
C	Number of doses per child	The immunization schedule	3	3	
D	Number of doses required	$B \times C$	17,343	17,343	
E	Estimated vaccine wastage factor	Table 4	1.05	1.05	
F	Number of doses required taking wastage into account	$D \times E$		18,211	
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 2	Stock on 1st January	Table 7.11.1	0	11,631	
I	Total vaccine doses required	$\text{Rounding } ((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		10,800	
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 the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of the 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 the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$				
S	Freight cost of the 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	9.93%		
B	Number of children to be vaccinated with the first dose	Table 4	6,104	607	5,497
C	Number of doses per child	The immunization schedule	3		
D	Number of doses required	$B \times C$	18,312	1,819	16,493
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses required taking wastage into account	$D \times E$	19,228	1,910	17,318
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> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	251	25	226
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$	7,079	704	6,375
H 2	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	12,600	1,252	11,348
J	Number of doses per vial	Vaccine parameter	1		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	12,633	1,255	11,378
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)	$(I / 100) \times 1.10$	139	14	125

N	Cost of the required vaccines	$I \times \text{price of vaccine per dose (g)}$	42,563	4,227	38,336
O	Cost of the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$	566	57	509
P	Cost of the required reconstitution syringes	$L \times \text{Reconstitution syringe price per unit (cr)}$	0	0	0
Q	Cost of the safety boxes required	$M \times \text{unit price of safety boxes (cs)}$	1	1	0
R	Freight cost of the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$	1,277	127	1,150
S	Freight cost of the required material	$(O+P+Q) \times \text{Freight cost as \% of the value of supplies (fd)}$	0	0	0
T	Total funds required	$(N+O+P+Q+R+S)$	44,407	4,410	39,997
U	Total country co-financing	$I \times \text{Country co-financing per dose (cc)}$	4,410		
V	Country co-financing % of GAVI supported proportion	$U / T$	9.93%		

**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 #	5,839	5,956	6,105	17,900
	Immunization coverage	Parameter %	98.00%	96.07%	95.97%	17,303
	Number of doses per child	Parameter #	1	1	1	
	Estimated vaccine wastage factor	Parameter #	1.67	1.05	1.25	
	Stock in Central Store Dec 31, 2014	#	4,390			
	Stock across second level Dec 31, 2014 (if available)*	#				
	Stock across third level Dec 31, 2014 (if available)*	Parameter #				
	Number of doses per vial	Parameter #		10	10	
	Number of AD syringes required	Parameter #		Yes	Yes	
	Number of reconstitution syringes required	Parameter #		Yes	Yes	
	Number of safety boxes required	Parameter #		Yes	Yes	
cc	Country co-financing per dose	Parameter \$		0.30	0.35	

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	%		7.50%	7.40%	
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.

\* No difference

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

Co-financing group	Intermediate
--------------------	--------------

	2014	2015	2016
Minimum co-financing	0.26	0.30	0.35
Recommended co-financing as per			0.35
Your co-financing	0.26	0.30	0.35



**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	5,722	5,722	
C	Number of doses per child	The immunization schedule	1	1	
D	Number of doses required	$B \times C$	5,722	5,722	
E	Estimated vaccine wastage factor	Table 4	1.67	1.05	
F	Number of doses required taking wastage into account	$D \times E$		6,009	
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 2	Stock on 1st January	Table 7.11.1	2,740	4,390	
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$		5,600	
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 the required AD syringes	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of the 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 the required vaccines	$N \times \text{Freight cost as \% of vaccine value (fv)}$				
S	Freight cost of the 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	31.71%		
B	Number of children to be vaccinated with the first dose	Table 4	5,859	1,858	4,001
C	Number of doses per child	The immunization schedule	1		
D	Number of doses required	$B \times C$	5,859	1,858	4,001
E	Estimated vaccine wastage factor	Table 4	1.25		
F	Number of doses required taking wastage into account	$D \times E$	7,324	2,323	5,001
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> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0,25$	329	105	224
H	Stock to be deducted	$H2 \text{ of the previous year} - 0.25 \times F \text{ of the previous year}$	2,888	916	1,972
H <sub>2</sub>	Stock on 1st January	Table 7.11.1			
I	Total vaccine doses required	Rounding $((F + G - H) / \text{vaccine pack size}) \times \text{vaccine pack size}$	4,800	1,523	3,277
J	Number of doses per vial	Vaccine parameter	10		
K	Number of Auto-disable syringes required (+10% wastage)	$(D + G - H) \times 1.10$	3,631	1,152	2,479
L	Number of Reconstitution syringes required (+10% wastage)	$(I / J) \times 1.10$	528	168	360
M	Total number of safety boxes required (10% extra)	$(I / 100) \times 1.10$	53	17	36

<b>N</b>	<b>Cost of the required vaccines</b>	<i>I x price of vaccine per dose (g)</i>	4,762	1,511	3,251
<b>O</b>	<b>Cost of the required AD syringes</b>	<i>K x AD syringe price per unit (ca)</i>	163	52	111
<b>P</b>	<b>Cost of the required reconstitution syringes</b>	<i>L X Reconstitution syringe price per unit (cr)</i>	19	7	12
<b>Q</b>	<b>Cost of the safety boxes required</b>	<i>M X unit price of safety boxes (cs)</i>	1	1	0
<b>R</b>	<b>Freight cost of the required vaccines</b>	<i>N x Freight cost as % of vaccine value (fv)</i>	353	112	241
<b>S</b>	<b>Freight cost of the required material</b>	<i>(O+P+Q) x Freight cost as % of the value of supplies (fd)</i>	0	0	0
<b>T</b>	<b>Total funds required</b>	<i>(N+O+P+Q+R+S)</i>	5,298	1,680	3,618
<b>U</b>	<b>Total country co-financing</b>	<i>I x Country co-financing per dose (cc)</i>	1,680		
<b>V</b>	<b>Country co-financing % of GAVI supported proportion</b>	<i>U / T</i>	31.71%		

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## 8. Health System Strengthening Support (HSS)

Sao Tome and Principe will not produce 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 improve coordination and the representation of CSOs

Sao Tome and Principe **has NOT received GAVI Type A support to CSOs**

Sao Tome and Principe will not present a report on GAVI Type A support to CSOs for 2014

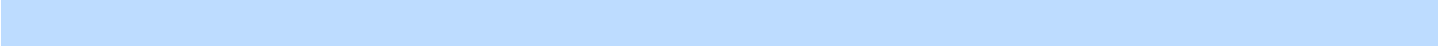
## 9.2. TYPE B : Support for CSOs to help implement the GAVI HSS proposal or CMYP

Sao Tome and Principe **has NOT received GAVI Type B support to CSOs**

Sao Tome and Principe 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.





# 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. These financial statements should be prepared in accordance with the 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 2013 calendar 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 REQUIREMENTS FOR ISS FINANCIAL STATEMENTS AND FOR THE ALLOCATION OF A VACCINE INTRODUCTION 1

*An example of income & expenditure statement*

Summary Table of income & expenditure – GAVI-ISS		
	Local Currency (CFA)	Value in USD*
Closing balance for 2013 (as of 31 December 2013)	25,392,830	53.000
<b>Summary of income received in 2014</b>		
Income received from GAVI	57,493,200	120.000
Income from interests	7,665,760	16.000
Other incomes (charges)	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>Closing Balance on 31 December 2014</b> (Balance carried over to 2015)	<b>60,139,325</b>	<b>125.523</b>

\* Enter the exchange rate at the opening on 01.01.2014, the exchange rate at close on 31.12.2014 of the financial year and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed Analysis of Expenses by economic classification** – GAVI ISS						
	Budget in CFA	Budget in US\$	Actual Expenses in CFA	Actual Expenses in USD	Variance in CFA	Variance in USD
<b>Salary expenditure</b>						
Wages & salaries	2,000,000	4.174	0	0	2,000,000	4.174
Payment of 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 expense categories are indicative and included only as an example Each Government will provide financial statements in compliance with their own economic classification system.

## 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. These financial statements should be prepared in accordance with the 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 REQUIREMENTS FOR FINANCIAL STATEMENTS FOR HSS-SUPPORT:

*An example of income & expenditure statement*

<b>Summary Table of income &amp; expenditure – GAVI-HSS</b>		
	<b>Local Currency (CFA)</b>	<b>Value in USD*</b>
Closing balance for 2013 (as of 31 December 2013)	25,392,830	53,000
<b>Summary of income received in 2014</b>		
Income received from GAVI	57,493,200	120,000
Income from interests	7,665,760	16,000
Other incomes (charges)	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>Closing Balance on 31 December 2014</b> (Balance carried over to 2015)	<b>60,139,325</b>	<b>125,523</b>

\* Enter the exchange rate at the opening on 01.01.2014, the exchange rate at close on 31.12.2014 of the financial year and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

<b>Detailed Analysis of Expenses by economic classification ** - GAVI-ISS</b>						
	<b>Budget in CFA</b>	<b>Budget in US\$</b>	<b>Actual Expenses in CFA</b>	<b>Actual Expenses in USD</b>	<b>Variance in CFA</b>	<b>Variance in USD</b>
<b>Salary expenditure</b>						
Wages & salaries	2,000,000	4,174	0	0	2,000,000	4,174
Payment of 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 expense categories are indicative and included only as an example Each Government will provide financial statements in compliance with their own economic classification system.

## 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. These financial statements should be prepared in accordance with the 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 2014 financial 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 REQUIREMENTS FOR FINANCIAL STATEMENTS ON TYPE- B CSO SUPPORT:

*An example of income & expenditure statement*











Summary Table of income & expenditure – GAVI-CSO		
	Local Currency (CFA)	Value in USD*
<b>Closing balance for 2013</b> (as of 31 December 2013)	25,392,830	53,000
<b>Summary of income received in 2014</b>		
Income received from GAVI	57,493,200	120,000
Income from interests	7,665,760	16,000
Other incomes (charges)	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>Closing Balance on 31 December 2014</b> (Balance carried over to 2015)	<b>60,139,325</b>	<b>125,523</b>












\* Enter the exchange rate at the opening on 01.01.2014, the exchange rate at close on 31.12.2014 of the financial year and also indicate the exchange rate used to convert the local currency into USD in these financial statements.

Detailed Analysis of Expenses by economic classification ** - GAVI-CSOs						
	Budget in CFA	Budget in US\$	Actual Expenses in CFA	Actual Expenses in USD	Variance in CFA	Variance in USD
<b>Salary expenditure</b>						
Wages & salaries	2,000,000	4,174	0	0	2,000,000	4,174
Payment of 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 expense categories are indicative and included only as an example Each Government will provide financial statements in compliance with their own economic classification system.

## 12. Attachments

Document Number	Document	Section	Mandatory	File
1	Signature of the Health Minister (or delegated authority)	2.1		<a href="#">CCIA 1x.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 09: 07 <b>Size:</b> 184 KB
2	Signature of the Finance Minister (or delegated authority)	2.1		<a href="#">CCIA 1x.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 09: 50 <b>Size:</b> 184 KB
3	Signatures of the ICC members	2.2		<a href="#">CCIA 2.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 10: 49 <b>Size:</b> 305 KB
4	Minutes of the ICC meeting in 2015 endorsing the Annual Progress Report 2014.	5.4		<a href="#">Acta de validação CCIA 2015.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 13: 22 <b>Size:</b> 351 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="#">Remarque.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 58: 21 <b>Size:</b> 10 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="#">Remarque 15062015.docx</a> <b>File desc:</b> <b>Date/Time:</b> 15/06/2015 09: 44: 51 <b>Size:</b> 13 KB

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="#">Remarque 15062015.docx</a> <b>File desc:</b> <b>Date/Time:</b> 15/06/2015 09: 45: 31 <b>Size:</b> 13 KB
12	EVSM/EVM/VMA report	7.5		<a href="#">Sao Tome &amp; Principe Rapport GEV 2015 final.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 19: 39 <b>Size:</b> 981 KB
13	Latest EVSM/EVM/VMA improvement plan	7.5		<a href="#">plan amelioration de gev.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 28: 53 <b>Size:</b> 64 KB
14	Status of the implementation of EVSM/EVM/VMA improvement plan	7.5		<a href="#">plan amelioration de gev.zip</a> <b>File desc:</b> <b>Date/Time:</b> 05/15/2015 11: 29: 15 <b>Size:</b> 64 KB
16	The valid cMYP, if the country is requesting an extension of support	7.8		<a href="#">STP cMYP (2012-2016)_FR.doc</a> <b>File desc:</b> <b>Date/Time:</b> 17/06/2015 08: 52: 37 <b>Size:</b> 2 MB
17	The costing tool for the valid cMYP, if the country is requesting an extension of support.	7.8		No file downloaded
18	Minutes of the ICC meeting approving the extension of vaccine support, if applicable	7.8		No file downloaded
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		No file downloaded
22	Review report of the health sector-HSS	8.9.3		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="#">Remarque.zip</a> File desc: <b>Date/Time:</b> 05/15/2015 11: 58: 57 <b>Size:</b> 10 KB
27	minutes_of_icc meeting_vaccin_change_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