

#### GAVI Alliance

# **Annual Progress Report 2013**

Submitted by

# The Government of Uzbekistan

Reporting on year: 2013

Requesting for support year: 2015

Date of submission: 16/05/2014

Deadline for submission: 22/05/2014

Please submit the APR 2013 using the online platform <a href="https://AppsPortal.gavialliance.org/PDExtranet">https://AppsPortal.gavialliance.org/PDExtranet</a>

Enquiries to: <a href="mailto:apr@gavialliance.org">apr@gavialliance.org</a> or representatives of a GAVI Alliance partner. The documents can be shared with GAVI Alliance partners, collaborators and general public. The APR and attachments must be submitted in English, French, Spanish, or Russian.

**Note**: You are encouraged to use previous APRs and approved Proposals for GAVI support as reference documents. The electronic copy of the previous APRs and approved proposals for GAVI support are available at <a href="http://www.gavialliance.org/country/">http://www.gavialliance.org/country/</a>

The GAVI Secretariat is unable to return submitted documents and attachments to countries. Unless otherwise specified, documents will be shared with the GAVI Alliance partners and the general public.

# GAVI ALLIANCE GRANT TERMS AND CONDITIONS

#### **FUNDING USED SOLELY FOR APPROVED PROGRAMMES**

The applicant country ("Country") confirms that all funding provided by the GAVI Alliance will be used and applied for the sole purpose of fulfilling the programme(s) described in the Country's application. Any significant change from the approved programme(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 THE APPLICATION

The Country will notify the GAVI Alliance in its Annual Progress Report (APR) if it wishes to propose any change to the programme(s) description in its application. The GAVI Alliance will document any change approved by the GAVI Alliance, and the Country's application will be amended.

#### RETURN OF FUNDS

The Country agrees to reimburse to the GAVI Alliance all funding amounts that are not used for the programme(s) described in its application. The country's reimbursement must be in US dollars and be provided, unless otherwise decided by the GAVI Alliance, within sixty (60) days after the Country receives the GAVI Alliance's request for a reimbursement and be paid to the account or accounts as directed by the GAVI Alliance.

#### SUSPENSION/ TERMINATION

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 purpose other than for the programmes described in the Country's application, or any GAVI Alliance-approved amendment to the application. The GAVI Alliance retains the right to terminate its support to the Country for the programmes described in its application if a 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 seek in connection with its application any gift, payment or benefit directly or indirectly that could be construed as an illegal or corrupt practice.

#### **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 its own or through an agent, to perform audits or other financial management assessment 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 maintain its accounting records in accordance with its government-approved accounting standards for at least three years after the date of last disbursement of GAVI Alliance funds. If there is any claims of misuse of funds, Country will 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 its application, and APR, are accurate and correct and form legally binding obligations on the Country, under the Country's law, to perform the programmes described in its application, as amended, if applicable, in the APR.

#### CONFIRMATION OF COMPLIANCE WITH THE GAVI ALLIANCE TRANSPARANCY AND ACCOUNTABILITY POLICY

The Country confirms that it is familiar with the GAVI Alliance Transparency and Accountability Policy (TAP) 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 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. The arbitration will be conducted in accordance with the then-current UNCITRAL Arbitration Rules. The parties agree to be bound by the arbitration award, as the final adjudication of any such dispute. The place of arbitration will be Geneva, Switzerland. The languages of the arbitration will be English or French.

For any dispute for which the amount at issue is US\$ 100,000 or less, there will be one arbitrator appointed by the GAVI Alliance. For any dispute for which the amount at issue 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 programmes described in the application, including without limitation, any financial loss, reliance claims, any harm to property, or personal injury or death. Country is solely responsible for all aspects of managing and implementing the programmes described in its application.

#### By filling this APR the country will inform GAVI about:

Accomplishments using GAVI resources in the past year

Important problems that were encountered and how the country has tried to overcome them

Meeting accountability needs concerning the use of GAVI disbursed funding and in-country arrangements with development partners

Requesting more funds that had been approved in 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 principles to be accountable and transparent.

# 1. Application Specification

Reporting on year: 2013

Requesting for support year: 2015

## 1.1. NVS & INS support

Type of Support	Current Vaccine	Preferred presentation	Active until	
Routine New Vaccines Support	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 10 dose(s) per vial, LIQUID	2015	
Routine New Vaccines Support	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2015	
Routine New Vaccines Support	Rotavirus, 2 -dose schedule	Rotavirus, 2 -dose schedule	2015	

**DTP-HepB-Hib (Pentavalent)** vaccine: Based on current country preferences the vaccine is available through UNICEF in fully liquid 1 and 10 dose vial presentations and in a 2 dose-2 vials liquid/lyophilised formulation, to be used in a three-dose schedule. Other presentations are also WHO pre-qualified, and a full list can be viewed on the WHO website, but availability would need to be confirmed specifically.

# 1.2. Programme extension

No NVS support eligible to extension this year

## 1.3. ISS, HSS, CSO support

Type of Support	Reporting fund utilisation in 2013	Request for Approval of	Eligible For 2013 ISS reward
HSS	No	next tranche of HSS Grant N/A	N/A
CSO Type A	No	Not applicable	N/A
CSO Type B		CSO Type B extension per GAVI Board Decision in July 2013: N/A	N/A
HSFP	No	Next tranch of HSFP Grant N/A	N/A
VIG	Yes	Not applicable	N/A
cos	No	Not applicable	N/A

VIG: Vaccine Introduction Grant; COS: Campaign Operational Support

## 1.4. Previous Monitoring IRC Report

APR Monitoring IRC Report for year 2012 is available here.

# 2. Signatures

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

By signing this page, the Government of Uzbekistan 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 funding 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 Uzbekistan

Please note that this APR will not be reviewed or approved by the Independent Review Committee (IRC) without the signatures of both the Minister of Health & Minister Finance or their delegated authority.

Minister of Health (or delegated authority)		Minister of Finance (or delegated authority)		
Name	Saidaliev S.Sdeputy Minister	Name	Khashimov B. A Head finance department	
Date		Date		
Signature		Signature		

This report has been compiled by (these persons may be contacted in case the GAVI Secretatiat has queries on this document):

Full name	Position Telephone		Email
	Deputy head of SES department of MOH, NIP Manager	+998712441603	dilorom.tursunova@minzdrav.uz

#### 2.2. ICC signatures page

If the country is reporting on Immunisation Services (ISS), Injection Safety (INS) and/or New and Under-Used Vaccines (NVS) supports

In some countries, HSCC and ICC committees are merged. Please fill-in each section where information is appropriate and upload in the attached documents section the signatures twice, one for HSCC signatures and one for ICC signatures

The GAVI Alliance Transparency and Accountability Policy (TAP) is an integral part of GAVI Alliance monitoring of country 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 immunisation Inter-Agency Coordinating Committee (ICC), endorse this report. Signature of endorsement of 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
Kim L. /Head of Immunoprophylaxis department	RSES		
Mukhamedov K./ Head of SES department	МОН		

Musabaev E./Director	Virology Institute	
Tursunova/Deputy head of SES department	мон	
Almatov B./ Chief doctor	RSES	
Tadjibaev G./Deputy chief doctor	RSES	
Huseynov Sh./Technical Officer	WHO	
Safaeva K./Health Officer	UNICEF	

ICC may wish to send informal comments to: <a href="mailto:apr@gavialliance.org">apr@gavialliance.org</a>

All comments will be treated confidentially

Comments from Partners:

Comments from the Regional Working Group:

# 2.3. HSCC signatures page

Uzbekistan is not reporting on Health Systems Strengthening (HSS) fund utilisation in 2013

# 2.4. Signatures Page for GAVI Alliance CSO Support (Type A & B)

Uzbekistan is not reporting on CSO (Type A & B) fund utilisation in 2014

#### 3. Table of Contents

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# 4. Baseline & annual targets

Countries are encouraged to aim for realistic and appropriate wastage rates informed by an analysis of their own wastage data. In the absence of country-specific data, countries may use indicative maximum wastage values as shown on the **Wastage Rate Table** available in the guidelines. Please note the benchmark wastage rate for 10ds pentavalent which is available.

	Achievements as per JRF		Targ	ets (preferr	ed presenta	ition)
Number	20	13	20	14	20	15
	Original approved target according to Decision Letter	Reported	Original approved target according to Decision Letter	Current estimation	Previous estimates in 2013	Current estimation
Total births	625,000	648,861	625,000	625,000	625,000	625,000
Total infants' deaths	7,000	5,200	7,000	7,000	7,000	7,000
Total surviving infants	618000	643,661	618,000	618,000	618,000	618,000
Total pregnant women	630,000	650,000	630,000	630,000	630,000	630,000
Number of infants vaccinated (to be vaccinated) with BCG	622,500	648,318	622,500	622,500	622,500	622,500
BCG coverage	100 %	100 %	100 %	100 %	100 %	100 %
Number of infants vaccinated (to be vaccinated) with OPV3	616,146	623,658	616,146	616,146	616,146	616,146
OPV3 coverage	100 %	97 %	100 %	100 %	100 %	100 %
Number of infants vaccinated (to be vaccinated) with DTP1	609,966	627,854	609,966	609,966	609,966	609,966
Number of infants vaccinated (to be vaccinated) with DTP3	613,674	622,981	613,674	613,674	613,674	613,674
DTP3 coverage	99 %	97 %	99 %	99 %	99 %	99 %
Wastage[1] rate in base-year and planned thereafter (%) for DTP	5	18	5	5	5	5
Wastage[1] factor in base- year and planned thereafter for DTP	1.05	1.22	1.05	1.05	1.05	1.05
Number of infants vaccinated (to be vaccinated) with 1 dose of DTP-HepB-Hib	609,966	627,854	609,966	609,966	609,966	609,966
Number of infants vaccinated (to be vaccinated) with 3 dose of DTP-HepB-Hib	609,966	622,981	609,966	609,966	613,674	613,674
DTP-HepB-Hib coverage	99 %	97 %	99 %	99 %	99 %	99 %
Wastage[1] rate in base-year and planned thereafter (%)	10	11	5	5	5	5
Wastage[1] factor in base- year and planned thereafter (%)	1.11	1.12	1.05	1.05	1.05	1.05
Maximum wastage rate value for DTP-HepB-Hib, 10 dose(s) per vial, LIQUID	25 %	0 %	25 % 25 %		25 %	25 %
Number of infants vaccinated (to be vaccinated) with 1 dose of Pneumococcal (PCV13)		0	609,966		617,000	617,000
Number of infants vaccinated (to be vaccinated) with 3 dose of Pneumococcal (PCV13)		0		609,966	616,456	616,456

Pneumococcal (PCV13) coverage		0 %		99 %	100 %	100 %
Wastage[1] rate in base-year and planned thereafter (%)		0		0	5	5
Wastage[1] factor in base- year and planned thereafter (%)		1		1	1.05	1.05
Maximum wastage rate value for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %	5 %	5 %
Number of infants vaccinated (to be vaccinated) with 1 dose of Rotavirus		0	627,736	609,966		600,000
Number of infants vaccinated (to be vaccinated) with 2 dose of Rotavirus		0	627,736	609,966		560,000
Rotavirus coverage		0 %	102 %	99 %		91 %
Wastage[1] rate in base-year and planned thereafter (%)		0	5	0		0
Wastage[1] factor in base- year and planned thereafter (%)		1	1.05	1		1
Maximum wastage rate value for Rotavirus, 2-dose schedule	0 %	5 %	5 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Measles	617,382	613,842	617,382	617,382	617,382	617,382
Measles coverage	100 %	95 %	100 %	100 %	100 %	100 %
Pregnant women vaccinated with TT+	0	0	0	0	0	0
TT+ coverage	0 %	0 %	0 %	0 %	0 %	0 %
Vit A supplement to mothers within 6 weeks from delivery	0	0	0	0	0	0
Vit A supplement to infants after 6 months	0	0	0	0	0	0
Annual DTP Drop out rate [ ( DTP1 – DTP3 ) / DTP1 ] x 100	-1 %	1 %	-1 %	-1 %	-1 %	-1 %

<sup>\*\*</sup> Number of infants vaccinated out of total surviving infants

<sup>\*\*\*</sup> Indicate total number of children vaccinated with either DTP alone or combined

<sup>\*\*\*\*</sup> Number of pregnant women vaccinated with TT+ out of total pregnant women

<sup>1</sup> The formula to calculate a vaccine wastage rate (in percentage): [ ( AB ) / A ] x 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.

# 5. General Programme Management Component

#### 5.1. Updated baseline and annual targets

Note: Fill in the table in section 4 Baseline and Annual Targets before you continue

The numbers for 2013 must be consistent with those that the country reported in the **WHO/UNICEF Joint Reporting Form (JRF) for 2013.** The numbers for 2014 - 2015 in <u>Table 4 Baseline and Annual Targets</u> should be consistent with those that the country provided to GAVI in previous APR or in new application for GAVI support or in cMYP.

In fields below, please provide justification and reasons for those numbers that in this APR are different from the referenced ones:

Justification for any changes in births

As in previous years, here was an increase in birth cohort due to Uzbekistani citizens living abroad and giving birth in Uzbekistan

Justification for any changes in surviving infants

Внедрение программы живорожденности, интегрированный подход, повышение кваилификации акушер гинекологов и неонотологов, улучшение технической оснащенности.

 Justification for any changes in targets by vaccine. Please note that targets in excess of 10% of previous years' achievements will need to be justified.

В связи с увеличением рождаемости и количества выживших младенцев, целевое населние также было увеличено.

- Justification for any changes in wastage by vaccine
  - 1. За счет 20 дозной вакцины;
  - 2. 30% труднодоступные районы;

#### 5.2. Immunisation achievements in 2013

5.2.1. Please comment on the achievements of immunisation programme against targets (as stated in last year APR), the key major activities conducted and the challenges faced in 2013 and how these were addressed:

#### Достижения:

- 1. Функционирует НТГЭИ;
- 2. Внедрены модули ВОЗ по иммунизации;
- 3. Финансовая устойчивость;
- 4. Интегрированный подход с другими программами;
- 5. Увеличение кураторских визитов;
- 6. Усовершенствован надзор за управляемыми инфекциями;
- 7. Повышена ответственность ВОП за программой иммунизации;
- 8. Улучшение патронажа согласно приказа МЗ №161 от 2013 года;
- 9. Подготовлен новый СанПин;
- 10. Все поданные заявки одобрены;

#### Проблемы:

- 1. Отсутсвие транспорта в труднодоступные районы;
- 2. Перебои с электроэнергией;
- 3. Устаревшее оборудование в первичном звене;
- 4. Нехватка квлифицированных кадров;
- 5.2.2. If targets were not reached, please comment on reasons for not reaching the targets:

Цели поставленные на 2013 год были достигнуты.

# 5.3. Monitoring the Implementation of GAVI Gender Policy

5.3.1. At any point in the past five years, were sex-disaggregated data on DTP3 coverage available in your country from administrative data sources and/or surveys? **yes, available** 

If yes, please report the latest data available and the year that it is from.

Data Source	Reference Year for Estimate	DTP3 Coverage Estimate		
		Boys	Girls	
Ежегодная медицинская перепись	2013	45%	55%	

5.3.2. How have any discrepancies in reaching boys versus girls been addressed programmatically?

#### N/A

- 5.3.3. If no sex-disaggregated data are available at the moment, do you plan in the future to collect sex-disaggregated coverage estimates? **Not selected**
- 5.3.4. How have any gender-related barriers to accessing and delivering immunisation services (eg, mothers not being empowered to access services, the sex of service providers, etc) been addressed programmatically? (For more information on gender-related barriers, please see GAVI's factsheet on gender and immunisation, which can be found on <a href="http://www.gavialliance.org/about/mission/gender/">http://www.gavialliance.org/about/mission/gender/</a>)

Данная проблема не возникала.

#### 5.4. Data assessments

5.4.1. Please comment on any discrepancies between immunisation coverage data from different sources (for example, if survey data indicate coverage levels that are different than those measured through the administrative data system, or if the WHO/UNICEF Estimate of National Immunisation Coverage and the official country estimate are different)

#### Не проводилось.

- \* Please note that the WHO UNICEF estimates for 2013 will only be available in July 2014 and can have retrospective changes on the time series.
- 5.4.2. Have any assessments of administrative data systems been conducted from 2012 to the present? **No** If Yes, please describe the assessment(s) and when they took place.

#### N/A

5.4.3. Please describe any major activities undertaken to improve administrative data systems from 2011 to the present.

#### Внедрена система электронной отчетности. Форма №1, форма №5, форма №6

- 5.4.4. Please describe any plans that are in place, or will be put into place, to make further improvements to administrative data systems.
- 1. Усовершенствование системы электронной отчетности.

#### 5.5. Overall Expenditures and Financing for Immunisation

The purpose of **Table 5.5a** is to guide GAVI understanding of the broad trends in immunisation programme expenditures and financial flows. Please fill the table using US\$.

Exchange rate used 1 US\$ = 2285	Enter the rate only; Please do not enter local currency name
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Table 5.5a: Overall Expenditure and Financing for Immunisation from all sources (Government and donors) in US\$

Expenditure by category	Expenditure Year 2013	Source of funding						
		Country	GAVI	UNICEF	WHO	n/a	n/a	n/a
Traditional Vaccines*	11,333,514,364	5,644,245,959	5,689,268,405	0	0	0	0	0
New and underused Vaccines**	0	0	0	0	0	0	0	0

Injection supplies (both AD syringes and syringes other than ADs)	164,359,593	29,958,178	134,401,415	0	0	0	0	0
Cold Chain equipment	83,916,625	0	83,916,625	0	0	0	0	0
Personnel	0	0	0	0	0	0	0	0
Other routine recurrent costs	200,000,000	200,000,000	0	0	0	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
Total Expenditures for Immunisation	11,781,790,582							
Total Government Health		5,874,204,137	5,907,586,445	0	0	0	0	0

<sup>\*</sup> Traditional vaccines: BCG, DTP, OPV (or IPV), Measles 1st dose (or the combined MR, MMR), TT. Some countries will also include HepB and Hib vaccines in this row, if these vaccines were introduced without GAVI support.

5.5.1. If there are no government funding allocated to traditional vaccines, please state the reasons and plans for the expected sources of funding for 2014 and 2015

N/A

#### 5.6. Financial Management

5.6.1. Has a GAVI Financial Management Assessment (FMA) been conducted prior to, or during the 2012 calendar year? **No, not implemented at all** 

**If Yes,** briefly describe progress against requirements and conditions which were agreed in any Aide Memoire concluded between GAVI and the country in the table below:

Action plan from Aide Mémoire	Implemented?

If the above table shows the action plan from Aide Memoire has been fully or partially implemented, briefly state exactly what has been implemented

N/A

If none has been implemented, briefly state below why those requirements and conditions were not met.

N/A

#### 5.7. Interagency Coordinating Committee (ICC)

How many times did the ICC meet in 2013? 4

Please attach the minutes (Document nº 4) from the ICC meeting in 2014 endorsing this report.

List the key concerns or recommendations, if any, made by the ICC on sections <u>5.1 Updated baseline and</u> annual targets to 5.5 Overall Expenditures and Financing for Immunisation

Are any Civil Society Organisations members of the ICC? No

If Yes, which ones?

List CSO member organisations:	

#### 5.8. Priority actions in 2014 to 2015

What are the country's main objectives and priority actions for its EPI programme for 2014 to 2015

- 1. Финансовая устойчивость;
- 2. Элиминация кори и краснухи;
- 3. Внедрение Ротавирусной вакцины;
- 4. Подготовка заявки на Инактивированную полию вакцину;
- 5. Обеспечение безопасной и устойчивой иммунизации;
- 6. Реализация ЕСР\$

## 5.9. 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 funding sources of Injection Safety material in 2013

Vaccine	Types of syringe used in 2013 routine EPI	Funding sources of 2013
BCG	Одноразовые шприцы	Местный бюджет
Measles	Одноразовые шприцы	Местный бюджет
ТТ		
DTP-containing vaccine	Одноразовые шприцы	Местный бюджет
Penta	Саморазрушающиеся шприци 0,5 гр	ГАВИ

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

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

If No: When will the country develop the injection safety policy/plan? (Please report in box below)

No

Please explain in 2013 how sharps waste is being disposed of, problems encountered, etc.

- 1. Открытое сжигание;
- 2. Централизованный сбор и утилизация в муфельных печах;

# 6. Immunisation Services Support (ISS)

# 6.1. Report on the use of ISS funds in 2013

Uzbekistan is not reporting on Immunisation Services Support (ISS) fund utilisation in 2013

# 6.2. Detailed expenditure of ISS funds during the 2013 calendar year

Uzbekistan is not reporting on Immunisation Services Support (ISS) fund utilisation in 2013

# 6.3. Request for ISS reward

Request for ISS reward achievement in Uzbekistan is not applicable for 2013

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

## 7.1. Receipt of new & under-used vaccines for 2013 vaccine programme

7.1.1. Did you receive the approved amount of vaccine doses for 2013 Immunisation Programme that GAVI communicated to you in its Decision Letter (DL)? Fill-in table below

Table 7.1: Vaccines received for 2013 vaccinations against approvals for 2013

	[ A ]	[B]		
Vaccine type		Total doses received by 31 December 2013	Total doses of postponed deliveries in 2013	Did the country experience any stockouts at any level in 2013?
DTP-HepB-Hib	1,600,000	1,600,000	0	No
Pneumococcal (PCV13)		0	0	Not selected
Rotavirus		0	0	Not selected

<sup>\*</sup>Please also include any deliveries from the previous year received against this Decision Letter

If values in [A] and [B] are different, specify:

 What are the main problems encountered? (Lower vaccine utilisation than anticipated due to delayed new vaccine introduction or lower coverage? Delay in shipments? Stock-outs? Excessive stocks? Problems with cold chain? Doses discarded because VVM changed colour or because of the expiry date? ...)

#### N/A

 What actions have you taken to improve the vaccine management, e.g. such as adjusting the plan for vaccine shipments? (in the country and with 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 optimise wastage, coverage and cost.

1. В сентябре 2013 миссия ВОЗ/ЮНИСЕФ, где обсуждался вопрос о своевременной поставки вакцин и поставки преквалифицированных и зарегистрированных вакцин.

If **Yes** for any vaccine in **Table 7.1**, please describe the duration, reason and impact of stock-out, including if the stock-out was at the central, regional, district or at lower facility level.

N/A

#### 7.2. Introduction of a New Vaccine in 2013

7.2.1. If you have been approved by GAVI to introduce a new vaccine in 2013, please refer to the vaccine introduction plan in the proposal approved and report on achievements:

DTP-HepB-Hib, 1 dose(s) per vial, LIQUID			
Phased introduction	No		
Nationwide introduction	Yes	09/03/2009	
The time and scale of introduction was as planned in the proposal? If No, Why?		slight delay due to late arrival of vaccines	

Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID			
Phased introduction	No		
Nationwide introduction	No		
The time and scale of introduction was as planned in the proposal? If No, Why?		Planned in 2015	

Rotavirus, 1 dose(s) per vial, ORAL			
Phased introduction	No		
Nationwide introduction	No		
The time and scale of introduction was as planned in the proposal? If No, Why?		Planned in June 2014	

## 7.2.2. When is the Post Introduction Evaluation (PIE) planned? March 2015

If your country conducted a PIE in the past two years, please attach relevant reports and provide a summary on the status of implementation of the recommendations following the PIE. (Document N° 9) )

the country conducted penta PIE in Nov 2011 combined with rota pre-introduction evaluation. RV introduction is planned for June 2014, thus RV PIE will be conducted in Q1 2015

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

Is there a national dedicated vaccine pharmacovigilance capacity? Yes

Is there a national AEFI expert review committee? Yes

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

Is the country sharing its vaccine safety data with other countries? Yes

Is the country sharing its vaccine safety data with other countries? Yes

Does your country have a risk communication strategy with preparedness plans to address vaccine crises?

#### 7.2.4. Surveillance

Does your country conduct sentinel surveillance for:

- a. rotavirus diarrhea? Yes
- b. pediatric bacterial meningitis or pneumococcal or meningococcal disease? Yes

Does your country conduct special studies around:

a. rotavirus diarrhea? Yes

b. pediatric bacterial meningitis or pneumococcal or meningococcal disease? No

If so, does the National Immunization Technical Advisory Group (NITAG) or the Inter-Agency Coordinating Committee (ICC) regularly review the sentinel surveillance and special studies data to provide recommendations on the data generated and how to further improve data quality? **No** 

Do you plan to use these sentinel surveillance and/or special studies data to monitor and evaluate the impact of vaccine introduction and use? **Yes** 

Please describe the results of surveillance/special studies and inputs of the NITAG/ICC:

NITAG does not review surveillance data routinely, however used it for decision making

#### 7.3. New Vaccine Introduction Grant lump sums 2013

## 7.3.1. Financial Management Reporting

	Amount US\$	Amount local currency	
Funds received during 2013 (A)	0	0	
Remaining funds (carry over) from 2012 (B)	0	0	
Total funds available in 2013 (C=A+B)	0	0	
Total Expenditures in 2013 (D)	0	0	
Balance carried over to 2014 (E=C-D)	0	0	

Detailed expenditure of New Vaccines Introduction Grant funds during the 2013 calendar year

Please attach a detailed financial statement for the use of New Vaccines Introduction Grant funds in the 2013 calendar year (Document No 10,11). Terms of reference for this financial statement are available in **Annexe** 1 Financial statements should be signed by the Finance Manager of the EPI Program and and the EPI Manager, or by the Permanent Secretary of Ministry of Health

## 7.3.2. Programmatic Reporting

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

No vaccine grants received in 2013.

Please describe any problem encountered and solutions in the implementation of the planned activities n/a

Please describe the activities that will be undertaken with any remaining balance of funds for 2014 onwards. The entire grant is expected in 2014

#### 7.4. Report on country co-financing in 2013

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

	2.1: What were the actual co-financed amounts and doses in 2013?				
Co-Financed Payments	Total Amount in US\$ Total Amount in Doses				
Awarded Vaccine #1: DTP-HepB- Hib, 1 dose(s) per vial, LIQUID	537,425	290,500			
Awarded Vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0	0			
Awarded Vaccine #3: Rotavirus, 1 dose(s) per vial, ORAL	0	0			

	Q.2: Which were the amounts of funding for country co-financing in reporting year 2013 from the following sources?					
Government	537425					
Donor	0					
Other	0					
	Q.3: Did you procure related injections vaccines? What were the amounts in U					
Co-Financed Payments	Total Amount in US\$	Total Amount in Doses				
Awarded Vaccine #1: DTP-HepB- Hib, 1 dose(s) per vial, LIQUID	0	0				
Awarded Vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0	0				
Awarded Vaccine #3: Rotavirus, 1 dose(s) per vial, ORAL	0	0				
	Q.4: When do you intend to transfer fu is the expected source of this funding	nds for co-financing in 2015 and what				
Schedule of Co-Financing Payments	Proposed Payment Date for 2015	Source of funding				
Awarded Vaccine #1: DTP-HepB- Hib, 1 dose(s) per vial, LIQUID	April	Government				
Awarded Vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	April	Government				
Awarded Vaccine #3: Rotavirus, 1 dose(s) per vial, ORAL	April	Government				
	Q.5: Please state any Technical Assistance needs for developing financial sustainability strategies, mobilising funding for immunization, including for co-financing					
	Визит совместной миссии ВОЗ/ГАВИ/ЮНИСЕФ для стратегических напрвлений финансовой устойчивости.					

If the country is in default, please describe and explain the steps the country is planning to take to meet its cofinancing requirements. For more information, please see the GAVI Alliance Default Policy: <a href="http://www.gavialliance.org/about/governance/programme-policies/co-financing/">http://www.gavialliance.org/about/governance/programme-policies/co-financing/</a>

## N/A

Is support from GAVI, in form of new and under-used vaccines and injection supplies, reported in the national health sector budget? **Yes** 

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

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 EVM tool can be found at <a href="http://www.who.int/immunization\_delivery/systems\_policy/logistics/en/index6.html">http://www.who.int/immunization\_delivery/systems\_policy/logistics/en/index6.html</a>

It is mandatory for the countries to conduct an EVM prior to an application for introduction of a new vaccine. This assessment concludes with an Improvement Plan including activities and timelines whose progress report is reported with annual 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? May 2012

#### Please attach:

- (a) EVM assessment (Document No 12)
- (b) Improvement plan after EVM (Document No 13)

(c) Progress report on the activities implemented during the year and status of implementation of recommendations from the Improvement Plan (**Document No 14**)

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

Are there any changes in the Improvement plan, with reasons? **Yes** If yes, provide details

- 1. Приобретено 2 холодильные комнаты, 56 горизонтальных холодильников, 4000 термосумок, 2 электрогенератора для центрального уровня и 14 электрогенераторов для областного уровня;
- 2. Произведен ремонт сухого склада для хранения шприцов и коробок, установлена сигнализация;

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

## 7.6. Monitoring GAVI Support for Preventive Campaigns in 2013

Uzbekistan does not report on NVS Preventive campaign

## 7.7. Change of vaccine presentation

Due to the high demand in the early years of introduction, and in order to ensure safe introductions of this new vaccine, countries' requests for switch of PCV presentation (PCV10 or PCV13) will not be considered until 2015.

Countries wishing to apply for switch from one PCV to another may apply in 2014 Annual Progress Report for consideration by the IRC

For vaccines other than PCV, if you would prefer, during 2013, to receive a vaccine presentation which differs from what you are currently being supplied (for instance the number of doses per vial, from one form (liquid/lyophilised) to the other, ...), please provide the vaccine specifications and refer to the minutes of the ICC meeting recommending the change of vaccine presentation. The reasons for requesting a change in vaccine presentation should be provided (e.g. cost of administration, epidemiologic data, number of children per session). Requests for change in presentation will be noted and considered based on the supply availability and GAVI's overall objective to shape vaccine markets, including existing contractual commitments. Country will be notified in the If supplied through UNICEF, planning for a switch in presentation should be initiated following the issuance of Decision Letter (DL) for next year, about the ability to meet the requirement including timelines for supply availability, if applicable. Countries should inform about the time required to undertake necessary activities for preparing such a taking into account country activities needed in order to switch as well as supply availability.

You have requested switch of presentation(s); Below is (are) the new presentation(s):

#### \* DTP-HepB-Hib, 10 dose(s) per vial, LIQUID

Please attach the minutes of the ICC and NITAG (if available) meeting (Document N° 27) that has endorsed the requested change.

# 7.8. Renewal of multi-year vaccines support for those countries whose current support is ending in 2014

Renewal of multi-year vaccines support for Uzbekistan is not available in 2014

#### 7.9. Request for continued support for vaccines for 2015 vaccination programme

In order to request NVS support for 2015 vaccination do the following

Confirm here below that your request for 2015 vaccines support is as per <u>7.11 Calculation of requirements</u> **Yes** 

If you don't confirm, please explain

N/A

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

## Table 7.10.1: Commodities Cost

Estimated prices of supply are not disclosed

Table 7.10.2: Freight Cost

Vaccine Antigens	VaccineTypes	No Threshold	200,	200,000\$		000\$
			<=	>	<=	>
DTP-HepB	HEPBHIB	2.00 %				
HPV bivalent	HPV	3.50 %				
HPV quadrivalent	HPV	3.50 %				
Measles second dose	MEASLES	14.00 %				
Meningococcal type A	MENINACONJUGATE	10.20 %				
MR	MR	13.20 %				
Pneumococcal (PCV10)	PNEUMO	3.00 %				
Pneumococcal (PCV13)	PNEUMO	6.00 %				
Rotavirus	ROTA	5.00 %				
Yellow Fever	YF	7.80 %				

Vaccine Antigens	VaccineTypes	500,000\$		2,000,000\$	
		<=	۸	<b>"</b>	>
DTP-HepB	HEPBHIB				
DTP-HepB-Hib	HEPBHIB	25.50 %	6.40 %		
HPV bivalent	HPV				
HPV quadrivalent	HPV				
Measles second dose	MEASLES				
Meningococcal type A	MENINACONJUGATE				
MR	MR				
Pneumococcal (PCV10)	PNEUMO				
Pneumococcal (PCV13)	PNEUMO				
Rotavirus	ROTA				
Yellow Fever	YF				

# 7.11. Calculation of requirements

Table 7.11.1: Specifications for DTP-HepB-Hib, 10 dose(s) per vial, LIQUID

ID		Source		2013	2014	2015	TOTAL
	Number of surviving infants	Table 4	#	618,000	618,000	618,000	1,854,000
	Number of children to be vaccinated with the first dose	Table 4	#	609,966	609,966	609,966	1,829,898
	Number of children to be vaccinated with the third dose	Table 4	#	609,966	609,966	613,674	1,833,606
	Immunisation coverage with	Table 4	%	98.70 %	98.70 %	99.30 %	

	the third dose						
	Number of doses per child	Parameter	#	3	3	3	
	Estimated vaccine wastage factor	Table 4	#	1.11	1.05	1.05	
	Vaccine stock on 31st December 2013 * (see explanation footnote)		#	1,022,880			
	Vaccine stock on 1 January 2014 ** (see explanation footnote)		#	1,022,880			
	Number of doses per vial	Parameter	#		10	10	
	AD syringes required	Parameter	#		Yes	Yes	
	Reconstitution syringes required	Parameter	#		No	No	
	Safety boxes required	Parameter	#		Yes	Yes	
СС	Country co-financing per dose	Co-financing table	\$		0.40	1.24	
ca	AD syringe price per unit	Table 7.10.1	\$		0.0450	0.0450	
cr	Reconstitution syringe price per unit	Table 7.10.1	\$		0	0	
cs	Safety box price per unit	Table 7.10.1	\$		0.0050	0.0050	
fv	Freight cost as % of vaccines value	Table 7.10.2	%		6.40 %	6.40 %	
fd	Freight cost as % of devices value	Parameter	%		0.00 %	0.00 %	

<sup>\*</sup> Vaccine stock on 31st December 2012: Countries are asked to report their total closing stock as of 31st December of the reporting year.

For pentavalent vaccines, GAVI applies a benchmark of 4.5 months of buffer + operational stocks. Countries should state their buffer + operational stock requirements when different from the benchmark up to a maximum of 6 months. For support on how to calculate the buffer and operational stock levels, please contact WHO or UNICEF. By default, a buffer + operational stock of 4.5 months is pre-selected.

#### Co-financing tables for DTP-HepB-Hib, 10 dose(s) per vial, LIQUID

Co-financing group	Graduating			
		2013	2014	2015
Minimum co-financing		0.34	0.40	0.96
Recommended co-financing as p	er APR 2012			0.96
Your co-financing		0.40	0.40	1.24

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

		2014	2015
Number of vaccine doses	#	1,496,200	595,800
Number of AD syringes	#	1,567,400	626,000

<sup>\*\*</sup> Countries are requested to provide their opening stock for 1st January 2014; if there is a difference between the stock on 31st December 2013 and 1st January 2014, please explain why in the box below.

Number of re-constitution syringes	#	0	0
Number of safety boxes	#	17,250	6,900
Total value to be co-financed by GAVI	\$	2,704,000	1,041,500

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

		2014	2015
Number of vaccine doses	#	425,400	1,455,300
Number of AD syringes	#	445,600	1,529,100
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	4,925	16,825
Total value to be co-financed by the Country <i>[1]</i>	\$	769,000	2,543,500

Table 7.11.4: Calculation of requirements for DTP-HepB-Hib, 10 dose(s) per vial, LIQUID (part 1)

		Formula	2013	2014		
				Total Government		GAVI
Α	Country co-finance	V	0.00 %	22.14 %		
В	Number of children to be vaccinated with the first dose	Table 4	609,966	609,966	135,019	474,947
В1	Number of children to be vaccinated with the third dose	Table 4	609,966	609,966	135,019	474,947
С	Number of doses per child	Vaccine parameter (schedule)	3	3		
D	Number of doses needed	B + B1 + Target for the 2nd dose ((B -0.41 x (B - B1))	1,829,898	1,829,898	405,057	1,424,841
Ε	Estimated vaccine wastage factor	Table 4	1.11	1.05		
F	Number of doses needed including wastage	DXE		1,921,393	425,310	1,496,083
G	Vaccines buffer stock	((D - D of previous year) x 0.5) + (((D x E - D) - (D of previous year x E of previous year - D of previous year)) x 0.5)		0	0	0
Н	Stock to be deducted	H1 - F of previous year x 0.5				
Н1	Calculated opening stock	H2 (2014) + H3 (2014) - F (2014)				
Н2	Reported stock on January 1st	Table 7.11.1	0	1,022,880		
Н3	Shipment plan	UNICEF shipment report		1,738,000		
I	Total vaccine doses needed	Round up((F + G - H) / vaccine package size) x vaccine package size		1,921,500	425,334	1,496,166
J	Number of doses per vial	Vaccine Parameter		10		
K	Number of AD syringes (+ 10% wastage) needed	(D + G – H) x 1.10		2,012,888	445,563	1,567,325
L	Reconstitution syringes (+ 10% wastage) needed	(I / J) x 1.10		0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	(K + L) / 100 x 1.10		22,142	4,902	17,240
N	Cost of vaccines needed	I x vaccine price per dose (g)		3,178,161	703,501	2,474,660
0	Cost of AD syringes needed	K x AD syringe price per unit (ca)		90,580	20,051	70,529
Р	Cost of reconstitution syringes needed	L x reconstitution price per unit (cr)		0	0	0
Q	Cost of safety boxes needed	M x safety box price per unit (cs)		111	25	86
R	Freight cost for vaccines needed	N x freight cost as of % of vaccines value (fv)		203,403	45,025	158,378
s	Freight cost for devices needed	(O+P+Q) x freight cost as % of devices value (fd)		0	0	0
Т	Total fund needed	(N+O+P+Q+R+S)		3,472,255	768,600	2,703,655
U	Total country co-financing	I x country co-financing per dose (cc)		768,600		
٧	Country co-financing % of GAVI supported proportion	U/T		22.14 %		

Given that the shipment plan of 2014 is not yet available, the volume approved for 2014 is used as our best proxy of 2014 shipment. The information would be updated when the shipment plan will become available.

Table 7.11.4: Calculation of requirements for DTP-HepB-Hib, 10 dose(s) per vial, LIQUID (part 2)

		Formula			
			Total Government		GAVI
Α	Country co-finance	V	70.95 %		
В	Number of children to be vaccinated with the first dose	Table 4	609,966	432,796	177,170
B1	Number of children to be vaccinated with the third dose	Table 4	613,674	435,427	178,247
С	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	B + B1 + Target for the 2nd dose ((B -0.41 x (B - B1))	1,835,127	1,302,096	533,031
Е	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	DXE	1,926,884	1,367,201	559,683
G	Vaccines buffer stock	$((D - D \text{ of previous year}) \times 0.5) + (((D \times E - D) - (D \text{ of previous year} \times E \text{ of previous year} - D \text{ of previous year})) \times 0.5)$	2,746	1,949	797
Н	Stock to be deducted	H1 - F of previous year x 0.5	- 121,208	- 86,002	- 35,206
H1	Calculated opening stock	H2 (2014) + H3 (2014) - F (2014)	839,487	595,650	243,837
Н2	Reported stock on January 1st	Table 7.11.1			
НЗ	Shipment plan	UNICEF shipment report			
I	Total vaccine doses needed	Round up((F + G - H) / vaccine package size) x vaccine package size	2,051,000	1,455,266	595,734
J	Number of doses per vial	Vaccine Parameter	10		
K	Number of AD syringes (+ 10% wastage) needed	(D + G – H) x 1.10	2,154,990	1,529,051	625,939
L	Reconstitution syringes (+ 10% wastage) needed	(I / J) x 1.10	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	(K + L) / 100 x 1.10	23,705	16,820	6,885
N	Cost of vaccines needed	l x vaccine price per dose (g)	3,277,498	2,325,515	951,983
0	Cost of AD syringes needed	K x AD syringe price per unit (ca)	96,975	68,808	28,167
Р	Cost of reconstitution syringes needed	L x reconstitution price per unit (cr)	0	0	0
Q	Cost of safety boxes needed	M x safety box price per unit (cs)	119	85	34
R	Freight cost for vaccines needed	N x freight cost as of % of vaccines value (fv)	209,760	148,834	60,926
s	Freight cost for devices needed	(O+P+Q) x freight cost as % of devices value (fd)	0	0	0
Т	Total fund needed	(N+O+P+Q+R+S)	3,584,352	2,543,240	1,041,112
U	Total country co-financing	I x country co-financing per dose (cc)	2,543,240		
٧	Country co-financing % of GAVI supported proportion	U/T	70.95 %		

Given that the shipment plan of 2014 is not yet available, the volume approved for 2014 is used as our best proxy of 2014 shipment. The information would be updated when the shipment plan will become available.

The calculated stock which is the stock level estimated by the end of year is negative. A negative calculated stock means that the consumption of the buffer stock would be needed to reach your planned target. Please explain the main reason(s) for replenishment of buffer stocks, such as higher than expected coverage, open vial wastage, other.

the issue of buffer stock was discussed during GAVI graduation mission in September 2013 and relevant recommendations received

The calculated stock which is the stock level estimated by the end of year is negative. A negative calculated stock means that the consumption of the buffer stock would be needed to reach your planned target. Please explain the main reason(s) for replenishment of buffer stocks, such as higher than expected coverage, open vial wastage, other.

recommendations rece	eived	GAVI graduation missi	on in September 2013 a	nu reievant

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

ID		Source		2013	2014	2015	TOTAL
	Number of surviving infants	Table 4	#	618,000	618,000	618,000	1,854,000
	Number of children to be vaccinated with the first dose	Table 4	#	0	0	617,000	617,000
	Number of children to be vaccinated with the third dose	Table 4	#			616,456	616,456
	Immunisation coverage with the third dose	Table 4	%	0.00 %	0.00 %	99.75 %	
	Number of doses per child	Parameter	#	3	3	3	
	Estimated vaccine wastage factor	Table 4	#	1.00	1.00	1.05	
	Vaccine stock on 31st December 2013 * (see explanation footnote)		#	0			
	Vaccine stock on 1 January 2014 ** (see explanation footnote)		#	0			
	Number of doses per vial	Parameter	#		1	1	
	AD syringes required	Parameter	#		Yes	Yes	
	Reconstitution syringes required	Parameter	#		No	No	
	Safety boxes required	Parameter	#		Yes	Yes	
СС	Country co-financing per dose	Co-financing table	\$		0.00	0.66	
ca	AD syringe price per unit	Table 7.10.1	\$		0.0450	0.0450	
cr	Reconstitution syringe price per unit	Table 7.10.1	\$		0	0	
cs	Safety box price per unit	Table 7.10.1	\$		0.0050	0.0050	
fv	Freight cost as % of vaccines value	Table 7.10.2	%		0.00 %	6.00 %	
fd	Freight cost as % of devices value	Parameter	%		0.00 %	0.00 %	_

<sup>\*</sup> Vaccine stock on 31st December 2012: Countries are asked to report their total closing stock as of 31st December of the reporting year.

#### N/A

Co-financing group

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

	<u> </u>		
	2013	2014	2015
Minimum co-financing	0.00	0.00	0.66
Recommended co-financing as per Proposal 2013			0.66
Your co-financing			0.66

Graduating

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

		2014	2015
Number of vaccine doses	#	0	1,987,000
Number of AD syringes	#	0	2,101,900
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	0	23,125
Total value to be co-financed by GAVI	\$	0	7,192,500

<sup>\*\*</sup> Countries are requested to provide their opening stock for 1st January 2014; if there is a difference between the stock on 31st December 2013 and 1st January 2014, please explain why in the box below.

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

		2014	2015
Number of vaccine doses	#	0	443,100
Number of AD syringes	#	0	468,700
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	0	5,175
Total value to be co-financed by the Country <i>[1]</i>	\$	0	1,604,000

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

		Formula	2013	2014		
				Total	Government	GAVI
Α	Country co-finance	V	0.00 %	0.00 %		
В	Number of children to be vaccinated with the first dose	Table 4	0	0	0	0
С	Number of doses per child	Vaccine parameter (schedule)	3	3		
D	Number of doses needed	BxC	0	0	0	0
Е	Estimated vaccine wastage factor	Table 4	1.00	1.00		
F	Number of doses needed including wastage	DXE		0	0	0
G	Vaccines buffer stock	((D - D of previous year) x 0.25) + (((D x E - D) - (D of previous year x E of previous year - D of previous year)) x 0.25)		0	0	0
Н	Stock to be deducted	H2 of previous year - 0.25 x F of previous year				
Н2	Reported stock on January 1st	Table 7.11.1	0			
ı	Total vaccine doses needed	Round up((F + G - H) / vaccine package size) x vaccine package size		0	0	0
J	Number of doses per vial	Vaccine Parameter		1		
K	Number of AD syringes (+ 10% wastage) needed	(D + G – H) x 1.10		0	0	0
L	Reconstitution syringes (+ 10% wastage) needed	(I / J) x 1.10		0	0	0
М	Total of safety boxes (+ 10% of extra need) needed	(K + L) / 100 x 1.10		0	0	0
N	Cost of vaccines needed	I x vaccine price per dose (g)		0	0	0
0	Cost of AD syringes needed	K x AD syringe price per unit (ca)		0	0	0
Р	Cost of reconstitution syringes needed	L x reconstitution price per unit (cr)		0	0	0
Q	Cost of safety boxes needed	M x safety box price per unit (cs)		0	0	0
R	Freight cost for vaccines needed	N x freight cost as of % of vaccines value (fv)		0	0	0
s	Freight cost for devices needed	(O+P+Q) x freight cost as % of devices value (fd)		0	0	0
Т	Total fund needed	(N+O+P+Q+R+S)		0	0	0
U	Total country co-financing	I x country co-financing per dose (cc)		0		
٧	Country co-financing % of GAVI supported proportion	U/T		0.00 %		

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

		Formula	2015		
			Total	Government	GAVI
Α	Country co-finance	v	18.23 %		
В	Number of children to be vaccinated with the first dose	Table 4	617,000	112,497	504,503
С	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	BxC	1,851,000	337,489	1,513,511
Е	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	DXE	1,943,550	354,363	1,589,187
G	Vaccines buffer stock	((D - D of previous year) x 0.25) + (((D x E - D) - (D of previous year x E of previous year - D of previous year)) x 0.25)	485,888	88,591	397,297
Н	Stock to be deducted	H2 of previous year - 0.25 x F of previous year	0	0	0
Н2	Reported stock on January 1st	Table 7.11.1			
ı	Total vaccine doses needed	Round up((F + G - H) / vaccine package size) x vaccine package size	2,430,000	443,056	1,986,944
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	(D + G – H) x 1.10	2,570,577	468,687	2,101,890
L	Reconstitution syringes (+ 10% wastage) needed	(I / J) x 1.10	0	0	0
М	Total of safety boxes (+ 10% of extra need) needed	(K + L) / 100 x 1.10	28,277	5,156	23,121
N	Cost of vaccines needed	I x vaccine price per dose (g)	8,189,100	1,493,098	6,696,002
0	Cost of AD syringes needed	K x AD syringe price per unit (ca)	115,676	21,091	94,585
Р	Cost of reconstitution syringes needed	L x reconstitution price per unit (cr)	0	0	0
Q	Cost of safety boxes needed	M x safety box price per unit (cs)	142	26	116
R	Freight cost for vaccines needed	N x freight cost as of % of vaccines value (fv)	491,346	89,586	401,760
s	Freight cost for devices needed	(O+P+Q) x freight cost as % of devices value (fd)	0	0	0
Т	Total fund needed	(N+O+P+Q+R+S)	8,796,264	1,603,800	7,192,464
U	Total country co-financing	I x country co-financing per dose (cc)	1,603,800		
٧	Country co-financing % of GAVI supported proportion	U/T	18.23 %		

Table 7.11.1: Specifications for Rotavirus, 1 dose(s) per vial, ORAL

ID		Source		2013	2014	2015	TOTAL
	Number of surviving infants	Table 4	#	618,000	618,000	618,000	1,854,000
	Number of children to be vaccinated with the first dose	Table 4	#	0	627,736	600,000	1,227,736
	Number of children to be vaccinated with the second dose	Table 4	#		627,736	560,000	1,187,736
	Immunisation coverage with the second dose	Table 4	%	0.00 %	101.58 %	90.61 %	
	Number of doses per child	Parameter	#	2	2	2	
	Estimated vaccine wastage factor	Table 4	#	1.00	1.05	1.00	
	Vaccine stock on 31st December 2013 * (see explanation footnote)		#	0			
	Vaccine stock on 1 January 2014 ** (see explanation footnote)		#	0			
	Number of doses per vial	Parameter	#		1	1	
	AD syringes required	Parameter	#		No	No	
	Reconstitution syringes required	Parameter	#		No	No	
	Safety boxes required	Parameter	#		No	No	
СС	Country co-financing per dose	Co-financing table	\$		0.20	0.80	
ca	AD syringe price per unit	Table 7.10.1	\$		0.0450	0.0450	
cr	Reconstitution syringe price per unit	Table 7.10.1	\$		0	0	
cs	Safety box price per unit	Table 7.10.1	\$		0.0050	0.0050	
fv	Freight cost as % of vaccines value	Table 7.10.2	%		5.00 %	5.00 %	
fd	Freight cost as % of devices value	Parameter	%		0.00 %	0.00 %	

<sup>\*</sup> Vaccine stock on 31st December 2012: Countries are asked to report their total closing stock as of 31st December of the reporting year.

#### N/A

Co-financing group

# Co-financing tables for Rotavirus, 1 dose(s) per vial, ORAL

	2013	2014	2015
Minimum co-financing	0.00	0.20	0.80
Your co-financing		0.20	0.80

Graduating

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

_		2014	2015
Number of vaccine doses	#	1,525,900	832,500
Number of AD syringes	#	0	0
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	0	0
Total value to be co-financed by GAVI	\$	4,103,500	2,231,500

<sup>\*\*</sup> Countries are requested to provide their opening stock for 1st January 2014; if there is a difference between the stock on 31st December 2013 and 1st January 2014, please explain why in the box below.

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

		2014	2015
Number of vaccine doses	#	122,700	354,100
Number of AD syringes	#	0	0
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	0	0
Total value to be co-financed by the Country <i>[1]</i>	\$	330,000	949,500

Table 7.11.4: Calculation of requirements for Rotavirus, 1 dose(s) per vial, ORAL (part 1)

		Formula	2013	2014		
				Total	Government	GAVI
Α	Country co-finance	V	0.00 %	7.44 %		
В	Number of children to be vaccinated with the first dose	Table 4	0	627,736	46,689	581,047
С	Number of doses per child	Vaccine parameter (schedule)	2	2		
D	Number of doses needed	BxC	0	1,255,472	93,377	1,162,095
Е	Estimated vaccine wastage factor	Table 4	1.00	1.05		
F	Number of doses needed including wastage	DXE		1,318,246	98,046	1,220,200
G	Vaccines buffer stock	((D - D of previous year) x 0.25) + (((D x E - D) - (D of previous year x E of previous year - D of previous year)) x 0.25)		329,562	24,512	305,050
Н	Stock to be deducted	H2 of previous year - 0.25 x F of previous year				
Н2	Reported stock on January 1st	Table 7.11.1	0			
I	Total vaccine doses needed	Round up((F + G - H) / vaccine package size) x vaccine package size		1,648,500	122,609	1,525,891
J	Number of doses per vial	Vaccine Parameter		1		
K	Number of AD syringes (+ 10% wastage) needed	(D + G – H) x 1.10		0	0	0
L	Reconstitution syringes (+ 10% wastage) needed	(I / J) x 1.10		0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	(I / 100) x 1.10		0	0	0
N	Cost of vaccines needed	I x vaccine price per dose (g)		4,221,809	314,000	3,907,809
0	Cost of AD syringes needed	K x AD syringe price per unit (ca)		0	0	0
Р	Cost of reconstitution syringes needed	L x reconstitution price per unit (cr)		0	0	0
Q	Cost of safety boxes needed	M x safety box price per unit (cs)		0	0	0
R	Freight cost for vaccines needed	N x freight cost as of % of vaccines value (fv)		211,091	15,701	195,390
s	Freight cost for devices needed	(O+P+Q) x freight cost as % of devices value (fd)		0	0	0
Т	Total fund needed	(N+O+P+Q+R+S)		4,432,900	329,700	4,103,200
U	Total country co-financing	I x country co-financing per dose (cc)		329,700		
٧	Country co-financing % of GAVI supported proportion	U/T		7.44 %		

Table 7.11.4: Calculation of requirements for Rotavirus, 1 dose(s) per vial, ORAL (part 2)

		Formula	2015		
			Total	Government	GAVI
Α	Country co-finance	V	29.84 %		
В	Number of children to be vaccinated with the first dose	Table 4	600,000	179,062	420,938
С	Number of doses per child	Vaccine parameter (schedule)	2		
D	Number of doses needed	BxC	1,200,000	358,123	841,877
Е	Estimated vaccine wastage factor	Table 4	1.00		
F	Number of doses needed including wastage	DXE	1,200,000	358,123	841,877
G	Vaccines buffer stock	((D - D of previous year) x 0.25) + (((D x E - D) - (D of previous year x E of previous year - D of previous year)) x 0.25)	- 13,868	- 4,138	- 9,730
Н	Stock to be deducted	H2 of previous year - 0.25 x F of previous year	0	0	0
Н2	Reported stock on January 1st	Table 7.11.1			
ı	Total vaccine doses needed	Round up((F + G - H) / vaccine package size) x vaccine package size	1,186,500	354,094	832,406
J	Number of doses per vial	Vaccine Parameter	1		
κ	Number of AD syringes (+ 10% wastage) needed	(D + G – H) x 1.10	0	0	0
L	Reconstitution syringes (+ 10% wastage) needed	(I / J) x 1.10	0	0	0
М	Total of safety boxes (+ 10% of extra need) needed	(I / 100) x 1.10	0	0	0
N	Cost of vaccines needed	l x vaccine price per dose (g)	3,029,135	904,000	2,125,135
0	Cost of AD syringes needed	K x AD syringe price per unit (ca)	0	0	0
Р	Cost of reconstitution syringes needed	L x reconstitution price per unit (cr)	0	0	0
Q	Cost of safety boxes needed	M x safety box price per unit (cs)	0	0	0
R	Freight cost for vaccines needed	N x freight cost as of % of vaccines value (fv)	151,457	45,201	106,256
s	Freight cost for devices needed	(O+P+Q) x freight cost as % of devices value (fd)	0	0	0
Т	Total fund needed	(N+O+P+Q+R+S)	3,180,592	949,200	2,231,392
U	Total country co-financing	I x country co-financing per dose (cc)	949,200		
٧	Country co-financing % of GAVI supported proportion	U/T	29.84 %		

# 8. Injection Safety Support (INS)

This window of support is no longer available

# 9. Health Systems Strengthening Support (HSS)

Uzbekistan is not reporting on Health Systems Strengthening (HSS) fund utilisation in 2014

Please complete and attach the <u>HSS Reporting Form</u> to report on the implementation of the new HSS grant which was approved in 2012 or 2013.

# 10. Strengthened Involvement of Civil Society Organisations (CSOs) : Type A and Type B

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

Uzbekistan has NOT received GAVI TYPE A CSO support

Uzbekistan is not reporting on GAVI TYPE A CSO support for 2013

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

Uzbekistan has NOT received GAVI TYPE B CSO support

Uzbekistan is not reporting on GAVI TYPE B CSO support for 2013

### 11. Comments from ICC/HSCC Chairs

Please provide any comments that you may wish to bring to the attention of the monitoring IRC in the course of this review and any information you may wish to share in relation to challenges you have experienced during the year under review. These could be in addition to the approved minutes, which should be included in the attachments

- 1. Своевременная отправка вакцин;
- 2.Отправка только зарегистрированных вакцин;

#### 12. Annexes

#### 12.1. Annex 1 - Terms of reference ISS

#### **TERMS OF REFERENCE:**

## FINANCIAL STATEMENTS FOR IMMUNISATION SERVICES SUPPORT (ISS) AND NEW VACCINE INTRODUCTION GRANTS

- I. All countries that have received ISS /new vaccine introduction grants during the 2013 calendar year, or had balances of funding remaining from previously disbursed ISS/new vaccine introduction grants in 2013, are required to submit financial statements for these programmes as part of their Annual Progress Reports.
- II. Financial statements should be compiled based upon countries' own national standards for accounting, thus GAVI will not provide a single template to countries with pre-determined cost categories.
- III. **At a minimum**, GAVI requires a simple statement of income and expenditure for activity during the 2013 calendar year, to be comprised of points (a) through (f), below. A sample basic statement of income and expenditure is provided on the next page.
  - a. Funds carried forward from the 2012 calendar year (opening balance as of 1 January 2013)
  - b. Income received from GAVI during 2013
  - c. Other income received during 2013 (interest, fees, etc)
  - d. Total expenditure during the calendar year
  - e. Closing balance as of 31 December 2013
  - f. A detailed analysis of expenditures during 2013, based on *your government's own system of economic classification*. This analysis should summarise total annual expenditure for the year by your government's own system of economic classification, and relevant cost categories, for example: wages & salaries. If possible, 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 31 December 2013 (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 have been audited/certified prior to their submission to GAVI. However, it is understood that these statements should be subjected to scrutiny during each country's external audit for the 2013 financial year. Audits for ISS are due to the GAVI Secretariat 6 months following the close of each country's financial year.

## 12.2. Annex 2 - Example income & expenditure ISS

## $\frac{\text{MINIMUM REQUIREMENTS FOR } \textbf{ISS}}{1} \text{ AND VACCINE INTRODUCTION GRANT FINANCIAL STATEMENTS}}{1}$

An example statement of income & expenditure

Summary of income and expenditure – GAVI ISS				
	Local currency (CFA)	Value in USD *		
Balance brought forward from 2012 (balance as of 31Decembre 2012)	25,392,830	53,000		
Summary of income received during 2013				
Income received from GAVI	57,493,200	120,000		
Income from interest	7,665,760	16,000		
Other income (fees)	179,666	375		
Total Income	38,987,576	81,375		
Total expenditure during 2013	30,592,132	63,852		
Balance as of 31 December 2013 (balance carried forward to 2014)	60,139,325	125,523		

<sup>\*</sup> Indicate the exchange rate at opening 01.01.2013, the exchange rate at closing 31.12.2013, and also indicate the exchange rate used for the conversion of local currency to US\$ in these financial statements.

Detailed analysis of expenditure by economic classification ** – GAVI ISS								
	Budget in CFA	Budget in USD	Actual in CFA	Actual in USD	Variance in CFA	Variance in USD		
Salary expenditure								
Wages & salaries	2,000,000	4,174	0	0	2,000,000	4,174		
Per diem payments	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949		
Non-salary expenditure	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 & overheads	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131		
Other expenditures								
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913		
TOTALS FOR 2013	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811		

<sup>\*\*</sup> Expenditure categories are indicative and only included for demonstration purpose. Each implementing government should provide statements in accordance with its own system for economic classification.

#### 12.3. Annex 3 - Terms of reference HSS

#### TERMS OF REFERENCE:

#### FINANCIAL STATEMENTS FOR HEALTH SYSTEMS STRENGTHENING (HSS)

- I. All countries that have received HSS grants during the 2013 calendar year, or had balances of funding remaining from previously disbursed HSS grants in 2013, are required to submit financial statements for these programmes as part of their Annual Progress Reports.
- II. Financial statements should be compiled based upon countries' own national standards for accounting, thus GAVI will not provide a single template to countries with pre-determined cost categories.
- III. At a minimum, GAVI requires a simple statement of income and expenditure for activity during the 2013 calendar year, to be comprised of points (a) through (f), below. A sample basic statement of income and expenditure is provided on the next page.
  - a. Funds carried forward from the 2012 calendar year (opening balance as of 1 January 2013)
  - b. Income received from GAVI during 2013
  - c. Other income received during 2013 (interest, fees, etc)
  - d. Total expenditure during the calendar year
  - e. Closing balance as of 31 December 2013
  - f. A detailed analysis of expenditures during 2013, based on your government's own system of economic classification. This analysis should summarise total annual expenditure for each HSS objective and activity, per your government's originally approved HSS proposal, with further breakdown by cost category (for example: wages & salaries). Cost categories used should be based upon your government's own system for economic classification. 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 31 December 2013 (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 have been audited/certified prior to their submission to GAVI. However, it is understood that these statements should be subjected to scrutiny during each country's external audit for the 2013 financial year. Audits for HSS are due to the GAVI Secretariat 6 months following the close of each country's financial year.

## 12.4. Annex 4 - Example income & expenditure HSS

#### MINIMUM REQUIREMENTS FOR HSS FINANCIAL STATEMENTS:

An example statement of income & expenditure

Summary of income and expenditure – GAVI HSS				
	Local currency (CFA)	Value in USD *		
Balance brought forward from 2012 (balance as of 31Decembre 2012)	25,392,830	53,000		
Summary of income received during 2013				
Income received from GAVI	57,493,200	120,000		
Income from interest	7,665,760	16,000		
Other income (fees)	179,666	375		
Total Income	38,987,576	81,375		
Total expenditure during 2013	30,592,132	63,852		
Balance as of 31 December 2013 (balance carried forward to 2014)	60,139,325	125,523		

<sup>\*</sup> Indicate the exchange rate at opening 01.01.2013, the exchange rate at closing 31.12.2013, and also indicate the exchange rate used for the conversion of local currency to US\$ in these financial statements.

Detailed analysis of expenditure by economic classification ** - GAVI HSS							
	Budget in CFA	Budget in USD	Actual in CFA	Actual in USD	Variance in CFA	Variance in USD	
Salary expenditure							
Wages & salaries	2,000,000	4,174	0	0	2,000,000	4,174	
Per diem payments	9,000,000	18,785	6,150,000	12,836	2,850,000	5,949	
Non-salary expenditure	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 & overheads	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131	
Other expenditures							
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913	
TOTALS FOR 2013	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811	

<sup>\*\*</sup> Expenditure categories are indicative and only included for demonstration purpose. Each implementing government should provide statements in accordance with its own system for economic classification.

#### 12.5. Annex 5 - Terms of reference CSO

#### TERMS OF REFERENCE:

#### FINANCIAL STATEMENTS FOR CIVIL SOCIETY ORGANISATION (CSO) TYPE B

- I. All countries that have received CSO 'Type B' grants during the 2013 calendar year, or had balances of funding remaining from previously disbursed CSO 'Type B' grants in 2013, are required to submit financial statements for these programmes as part of their Annual Progress Reports.
- II. Financial statements should be compiled based upon countries' own national standards for accounting, thus GAVI will not provide a single template to countries with pre-determined cost categories.
- III. At a minimum, GAVI requires a simple statement of income and expenditure for activity during the 2013 calendar year, to be comprised of points (a) through (f), below. A sample basic statement of income and expenditure is provided on page 3 of this annex.
  - a. Funds carried forward from the 2012 calendar year (opening balance as of 1 January 2013)
  - b. Income received from GAVI during 2013
  - c. Other income received during 2013 (interest, fees, etc)
  - d. Total expenditure during the calendar year
  - e. Closing balance as of 31 December 2013
  - f. A detailed analysis of expenditures during 2013, based on your government's own system of economic classification. This analysis should summarise total annual expenditure by each civil society partner, per your government's originally approved CSO 'Type B' proposal, with further breakdown by cost category (for example: wages & salaries). Cost categories used should be based upon your government's own system for economic classification. 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 31 December 2013 (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 have been audited/certified prior to their submission to GAVI. However, it is understood that these statements should be subjected to scrutiny during each country's external audit for the 2013 financial year. Audits for CSO 'Type B' are due to the GAVI Secretariat 6 months following the close of each country's financial year.

## 12.6. Annex 6 - Example income & expenditure CSO

### MINIMUM REQUIREMENTS FOR CSO 'Type B' FINANCIAL STATEMENTS

An example statement of income & expenditure

Summary of income and expenditure – GAVI CSO				
	Local currency (CFA)	Value in USD *		
Balance brought forward from 2012 (balance as of 31Decembre 2012)	25,392,830	53,000		
Summary of income received during 2013				
Income received from GAVI	57,493,200	120,000		
Income from interest	7,665,760	16,000		
Other income (fees)	179,666	375		
Total Income	38,987,576	81,375		
Total expenditure during 2013	30,592,132	63,852		
Balance as of 31 December 2013 (balance carried forward to 2014)	60,139,325	125,523		

<sup>\*</sup> Indicate the exchange rate at opening 01.01.2013, the exchange rate at closing 31.12.2013, and also indicate the exchange rate used for the conversion of local currency to US\$ in these financial statements.

Detailed analysis of expenditure by economic classification ** - GAVI CSO							
	Budget in CFA	Budget in USD	Actual in CFA	Actual in USD	Variance in CFA	Variance in USD	
Salary expenditure							
Wages & salaries	2,000,000	4,174	0	0	2,000,000	4,174	
Per diem payments	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 & overheads	2,500,000	5,218	1,000,000	2,087	1,500,000	3,131	
Other expenditures							
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913	
TOTALS FOR 2013	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811	

<sup>\*\*</sup> Expenditure categories are indicative and only included for demonstration purpose. Each implementing government should provide statements in accordance with its own system for economic classification.

## 13. Attachments

Document Number	Document	Section	Mandatory	File
1	Signature of Minister of Health (or delegated authority)	2.1	<b>✓</b>	Ministers signatures.pdf File desc: Date/time: 14/05/2014 07:22:45 Size: 450 KB
2	Signature of Minister of Finance (or delegated authority)	2.1	<b>*</b>	Ministers signatures.pdf File desc: Date/time: 14/05/2014 07:24:54 Size: 450 KB
3	Signatures of members of ICC	2.2	>	ICC signature.pdf File desc: Date/time: 14/05/2014 07:26:40 Size: 151 KB
4	Minutes of ICC meeting in 2014 endorsing the APR 2013	5.7	>	протоколы ГАВИ 2013гdoc File desc: Date/time: 13/05/2014 02:25:55 Size: 79 KB
5	Signatures of members of HSCC	2.3	×	No file loaded
6	Minutes of HSCC meeting in 2014 endorsing the APR 2013	9.9.3	>	Not applicable.docx File desc: Date/time: 16/05/2014 09:49:02 Size: 11 KB
7	Financial statement for ISS grant (Fiscal year 2013) signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	6.2.1	×	No file loaded
8	External audit report for ISS grant (Fiscal Year 2013)	6.2.3	×	No file loaded
9	Post Introduction Evaluation Report	7.2.2	<b>~</b>	UZB_Pre-RV intro evaluation.pptx File desc: , Date/time : 16/05/2014 09:53:15 Size: 627 KB

10	Financial statement for NVS introduction grant (Fiscal year 2013) signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	7.3.1	✓	Not applicable.docx File desc: , Date/time: 16/05/2014 09:55:58 Size: 11 KB
11	External audit report for NVS introduction grant (Fiscal year 2013) if total expenditures in 2013 is greater than US\$ 250,000	7.3.1	<b>√</b>	Not applicable.docx File desc: Date/time: 16/05/2014 10:01:36 Size: 11 KB
12	Latest EVSM/VMA/EVM report	7.5	<b>√</b>	Att 09. EVM Report-UZB (2012).pdf File desc: Date/time: 16/05/2014 10:07:41 Size: 1 MB
13	Latest EVSM/VMA/EVM improvement plan	7.5	<b>*</b>	Att 16. EVM improvement plan 2013.pdf File desc: Date/time: 16/05/2014 10:10:46 Size: 32 KB
14	EVSM/VMA/EVM improvement plan implementation status	7.5	<b>~</b>	Att 16. EVM improvement plan 2013.pdf File desc: Date/time: 16/05/2014 10:13:42 Size: 32 KB
16	Valid cMYP if requesting extension of support	7.8	×	No file loaded
17	Valid cMYP costing tool if requesting extension of support	7.8	×	No file loaded
18	Minutes of ICC meeting endorsing extension of vaccine support if applicable	7.8	×	No file loaded
19	Financial statement for HSS grant (Fiscal year 2013) signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	9.1.3	×	No file loaded
20	Financial statement for HSS grant for January-April 2014 signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	9.1.3	×	No file loaded

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21	External audit report for HSS grant (Fiscal Year 2013)	9.1.3	×	No file loaded
22	HSS Health Sector review report	9.9.3	×	No file loaded
23	Report for Mapping Exercise CSO Type A	10.1.1	×	No file loaded
24	Financial statement for CSO Type B grant (Fiscal year 2013)	10.2.4	×	No file loaded
25	External audit report for CSO Type B (Fiscal Year 2013)	10.2.4	×	No file loaded
26	Bank statements for each cash programme or consolidated bank statements for all existing cash programmes if funds are comingled in the same bank account, showing the opening and closing balance for year 2013 on (i) 1st January 2013 and (ii) 31st December 2013	0	<b>&gt;</b>	Not applicable.docx File desc: Date/time: 16/05/2014 09:46:06 Size: 11 KB
27	Minutes ICC meeting endorsing change of vaccine prensentation	7.7	×	No file loaded
	Other		×	No file loaded