September 2023 IRC
Screening of request for IPV second dose – *(Switch request)*

Instructions:

1. The NVS applications Secretariat pre-screening starts directly after the submission deadline.
2. First, the FD&R team fills in Section A and B. When done, the respective focal points are notified by email to fill in their parts of this form. **In addition to corresponding parts in Section B,** the following sections are to be filled in: the SCM/PM (Section C1.) and VP team (C2) and VFGO focal point (C3).
3. If any issues are identified, such as missing mandatory documents or technical issues as outlined by the various teams and partners (please see yellow column of Section B.), the SCM/PO notifies the country as soon as possible to obtain the document/clarification needed.
4. When clarifications come in, the PM or SCM to forward the information to all teams involved in the pre-screening and to proposals@gavi.org
5. The respective teams update their sections of this pre-screening form, in particular the orange columns incl. 'country response' in Section B., based on the revised/additional information received and to clearly indicate final/still applicable comments.
6. **The SCM has to ensure the below form is fully filled in and indicates in Section A. if the country is ready for review.**

Section A. Summary

Country:	Sao Tomé et Principe
Application for:	IPV second dose switch

- **Summary of the request** *(filled in by VI)*

Routine introduction date (month & year):	January 2024
Birth cohort in year of IPV second dose introduction:	7,092
Target population routine IPV first dose (#):	6,940 (100% surviving infants)
Target population routine IPV second dose (#):	6,940 (100% surviving infants)
Gavi ceiling for Product Switch Grant (US $):	Max US $30K
Gavi Product Switch Grant requested (US $):	No

- **Prepared by:**

FD&R Team - *please add your name*	Phuong Ly
SCM/PM - *please add your name*	Aichatou/Elizaveta
VP Team - *please add your name*	Katy Clark
Country Ready for Review (Yes/No)?	Yes
Date of SCM sign off – *that country is or is not ready for review*	07/08/2023

Section B. Completeness check (first step performed by VI and SCM/PO to comment as necessary)

	Submitted (Yes/No)? *To be filled by FD&R team*	**SCM/PM comments** (*as deemed necessary)*	**VP comments** *(where relevant)*	**Items for follow-up with the country**	**Country response** (either briefly provide here or reference to document submitted)	**Has country responded satisfactorily to action points?**
Background requirements						
Has the country signed a Partnership Framework (PFA) with Gavi?	yes					
Is the country in default list for co-financing?	tbc	Co-financing obligations fully outstanding				
Country's transitioning phase	Accelerated transition					
Mandatory documents						
1. Switch Request Form	yes					
2. Minister of Health signature (or delegated authority) of Proposal	Yes					
3. Minister of Finance signature (or delegated authority) of Proposal **Recommended but not mandatory**	yes					
4. Minutes of the Coordination Forum meeting endorsing Proposal	yes					
5. Role and functioning of the advisory group/ NITAG and minutes of NITAG meeting with specific recommendations on the IPV second dose schedule *(mandatory for countries where a NITAG exists)* OR Description of plans to establish a NITAG *(for countries where the*	no	No NITAG in STP				

	Submitted (Yes/No)? *To be filled by FD&R team*	**SCM/PM comments** (*as deemed necessary)*	**VP comments** *(where relevant)*	**Items for follow-up with the country**	**Country response** (either briefly provide here or reference to document submitted)	**Has country responded satisfactorily to action points?**
NITAG does not exist – recommended not mandatory)						
6. If PSG – Product switch grant requested: a) Gavi budget template used? b) The requested amount (in the Excel budget file) falls within the maximum allowable amount[1]? c) any comments on the request of salaries/top ups, allowances?[2]	na	No switch grant requested, only doses -> assuming no budget is required under these conditions	No budget required if a switch grant is not requested.			
Has an IPV2 introduction Plan been provided? **Recommended but not mandatory**	no					
Technical contents – not screened by FD&R						
Did the country indicate other reasons for submitting a switch request?			Yes			
Based on the polio eradication indicators and narrative on status and challenges, what level of risk is the country exposed to?			Low			
Does the country request a change of presentation and if so why?			Yes, to minimize waste and maximize efficiency			
Is there sufficient cold chain capacity at all levels to accommodate the vaccine?			Yes			

[1] **PSG**: Per infant in the birth cohort in year of introduction or a lump sum of $30,000, whichever is higher.

[2] With more detailed review by Programme Finance if required.

	Submitted (Yes/No)? *To be filled by FD&R team*	**SCM/PM comments** (*as deemed necessary)*	**VP comments** *(where relevant)*	**Items for follow-up with the country**	**Country response** (either briefly provide here or reference to document submitted)	**Has country responded satisfactorily to action points?**
What is the proposed IPV vaccination schedule, is the justification acceptable and is it consistent with NITAG and SAGE recommendations?			IPV2 at 9 mos is consistent with SAGE recommendation			
1. Are the annual targets adjusted considering the exact scheduled month of introduction (and aligned to month of introduction) Are the targets consistent throughout the different documents and sections?	-	VI to fill in	Seem to be some adjustment, but the figures are confusing. I think that section needs another look.			
2. Does the country provide details on NRA and product licensing in the country?	-	VI to fill in	Product is licensed in the country.			

<u>Section C1.</u> ***Comments by Senior Country Manager (SCM)***

Please provide additional information and context to supplement the information included by the country in the submitted proposal. The responses should be based on the SCM's knowledge from engaging with the country rather than a detailed review or synthesis of the application materials. Also, add any recent and important information you may have on the cold chain capacity, not (yet) reflected in the country documents.

Follow up on two questions after pre-screening of the application:

1. Is there any possibility to integrate the introduction of IPV 2 with other planned immunisation activities?

IPV2 will be given at 9 months with 2 other antigens (MCV1 and YF)

2. Has the government considered the opportunity to increase IPV first dose coverage through the introduction of IPV 2 dose and are there plans to improve IPV coverage?

IPV1 coverage is at 93% and measles first dose at 77%. The country focus is improving the fully immunised children coverage and the measles 2nd coverage currently at 69%.

Please provide reference data points to inform review of the country proposal using Country Files to fill the information. Indicate the year these data points refer to and provide any additional information that may be considered for the review of the country proposal and the estimation of the IPV2 dose allocation.

IPV1 for the year of IPV2 introduction or most recent year available	**IPV1**
1. Annual vaccine requirement (year)	2024
2. Dose allocation (year)	6971 doses (2024 for IPV1)
Antigen(s) administered at the same touch point as IPV2 for the year of IPV2 introduction or most recent year available	**Yellow Fever**
3. Birth Cohort	7,092
4. Target population (year)	6,940 (2024)
5. Annual vaccine requirement (year)	10,860 doses including wastage but excluding buffer and stock estimates
6. Dose allocation (year)	10,926 (2024)

Section C2. ***Comments by Vaccine Programme Manager***

Questions to be clarified:

- Is there any possibility to integrate with other activities?
- How to include zero-dose considerations?

Integration with other vaccines is mentioned in the application (eg, MR, Yellow Fever), as well as incorporation into efforts to reach zero dose children.