# **Response to conditions**

**COUNTRY: LESOTHO**

**Vaccine: PCV13, 1 doses/vial, liquid**

**Condition 1:**

The IRC could not determine whether the cold chain was ready for the introduction of the requested vaccine.

**Central**

According to the 2011 effective vaccine management assessment (EVMA) findings, the existing cold storage capacity of 300 litres for cold room is sufficient at central level. Also to mention that in view of the upcoming introduction of new pneumococcal vaccine, the country is in the process of expanding the cold room to increase the cold chain capacity to accommodate more new vaccines the country is planning to introduce in the future.

That is; procurement of the walk-in cold room through WHO and proposed installation by end January 2012.

Funding has been secured from the MoHSW for expansion of vaccine and dry stock storage facility and construction of such is underway.

**Districts**

The EVMA results indicated inadequate storage capacity at district level and similarly, the country is in the process of procuring vaccine fridges for all ten districts and health facilities again through WHO to replace equipment that was found to be insufficient and non-functional as part of implementation of improvement plan. Funding for procurement of mentioned fridges has been secured from the MoHSW and technical guidance also sought from WHO to facilitate procurement of WHO/UNICEF prequalified cold chain equipment.

Following recommendations from 2008 VMA, health facilities have been supplied with gas for fridges on quarterly basis and this includes provision of standby filled gas cylinder to ensure continuous functioning of fridges.

It is also worth noting that the MoHSW had procured 500 ACB 246 LB cold boxes and 1,000 vaccine carriers and this further provides additional cold chain capacity.

 Please refer to improvement plan (attached) for detailed outline and description of efforts put in place regarding readiness of cold chain capacity for introduction of the new vaccine requested.

**Condition 2**

There was no evidence that the numerous issues raised in the VMA of 2008 are being addressed. Therefore the country should provide an implementation status report demonstrating that major issues highlighted in the VMA of 2008 are being resolved.

The 2011 EVMA conducted in August/September yielded similar results to 2008 VMA. Some recommendations from the 2008 assessment have been addressed; for instance, the vaccine management component was observed as a weak area. Therefore training on vaccine management was conducted in 2010 with technical support from WHO sub-regional office and among other issues of concern pertaining to 2008 VMA recommendations, the following were covered:

- Temperature monitoring

- Prevention of stock outs/overstocking and estimating vaccine requirements and other logistics

- Performance of shake test and interpretation of VVM

- Vaccine and vaccine supplies record keeping

- Vaccine wastage monitoring

In addition, a national EPI logistician was deployed at central level.

 Some of the recommendations are being addressed through implementation of 2011 EVMA recommendations and are reflected in the improvement plan. Please refer to the attachment/2011 EVMA improvement plan for reference)

# **Signatures of the Government**

Enter the family name in capital letters.

| **Minister of Health (or delegated authority)** | **Minister of Finance (or delegated authority)** |
| --- | --- |
| **Name** |  | **Name** |  |
| **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):*

Enter the family name in capital letters.

| **Full name** | **Position** | **Telephone** | **Email** |
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