

Partners' Engagement Framework (PEF) & Alliance Accountability Framework

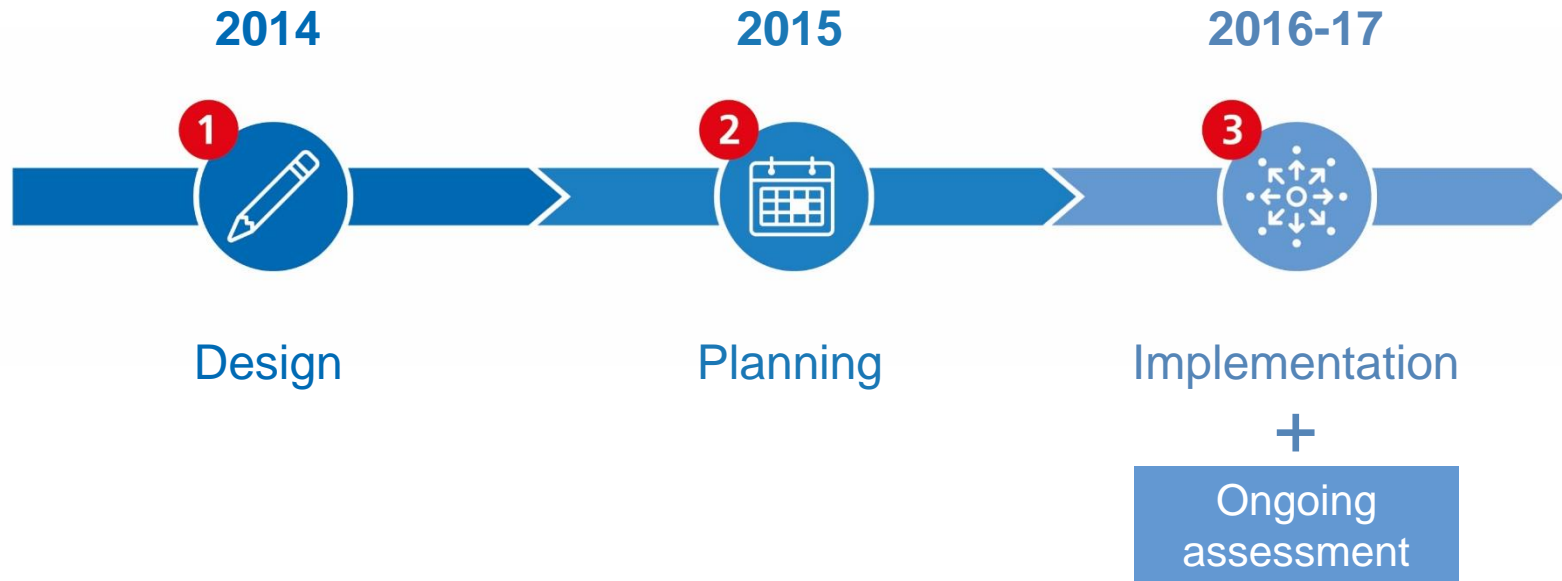
BOARD MEETING
Anuradha Gupta
22-23 June 2016, Geneva



Reach every child

www.gavi.org

Evolution of Partners' Engagement Framework



What has changed?

Business plan

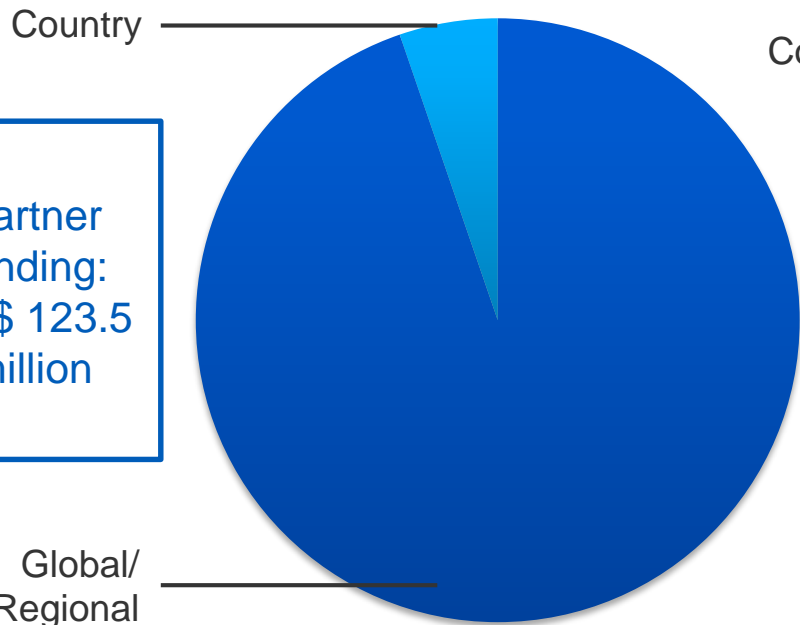
- Funding at global/regional levels
- Countries had no role/visibility on TA
- TA was standalone
- Accountability based on process deliverables at global level
- Limited scope for new partners; some duplication of efforts
- Workshop/training approach to build country capacity
- Incremental budgeting

Partners' Engagement Framework

- Substantial funding at country level
- Countries design TA and choose providers
- TA part of overall support package
- Accountability based on outcomes at country level
- Leveraging of comparative advantage; expanded partners; harmonisation
- Support embedded in countries to transfer skills
- Budget driven by performance/needs

Country-centric lens

Business Plan 2015

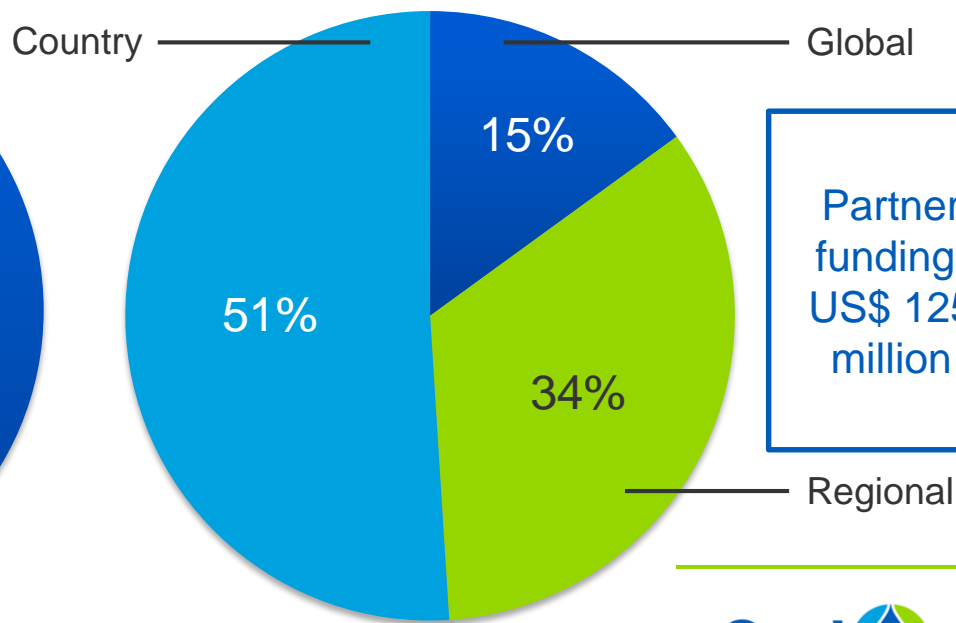


Partner funding:
US\$ 123.5 million

Global/
Regional

Estimated values

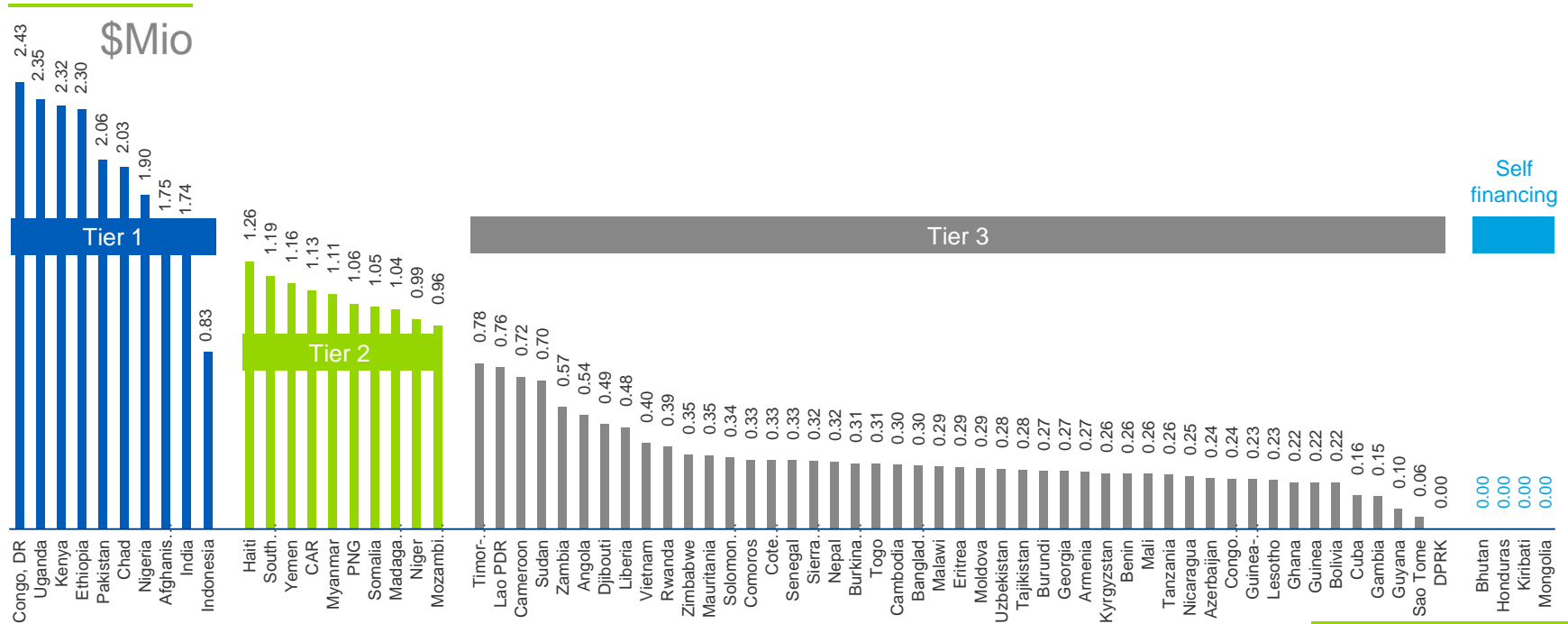
PEF 2016 (all partners)



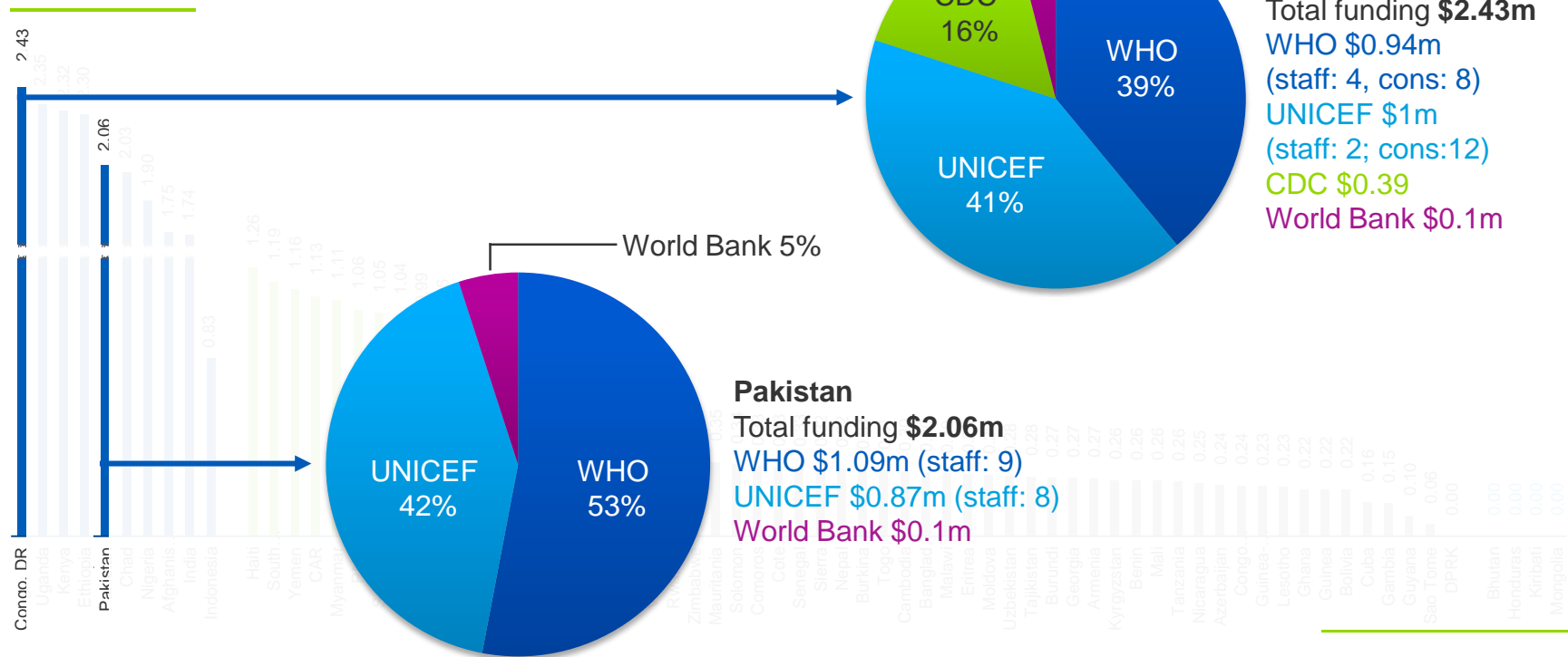
Partner funding:
US\$ 125 million

Regional

Differentiation: PEF funding per country



Tailored approach based on country context



Accountability

PEF Functions

- A set of 20 outcomes under 5 topical areas expected in all countries
- Reviewed at Global/Regional/ Country level

- Country Planning, Management, Monitoring
- Data
- Supply Chain and Vaccine Management
- Vaccine implementation
- Countries on track for successful transition

Under Business Plan 2011-15:

- 100 quarterly deliverables
- No evaluation

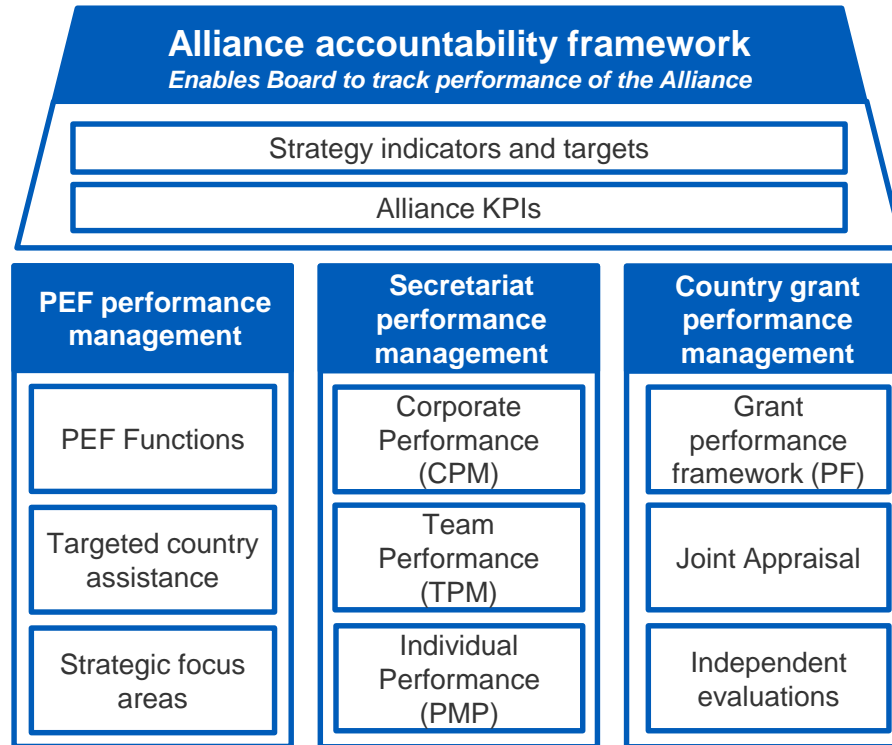
TCA milestones

- An additional set of dynamic country-specific milestones
- Reviewed at country level

Evaluation

- A prospective, multi-year evaluation of TCA
- An innovative web-based tool for assessment by countries, providers and other stakeholders

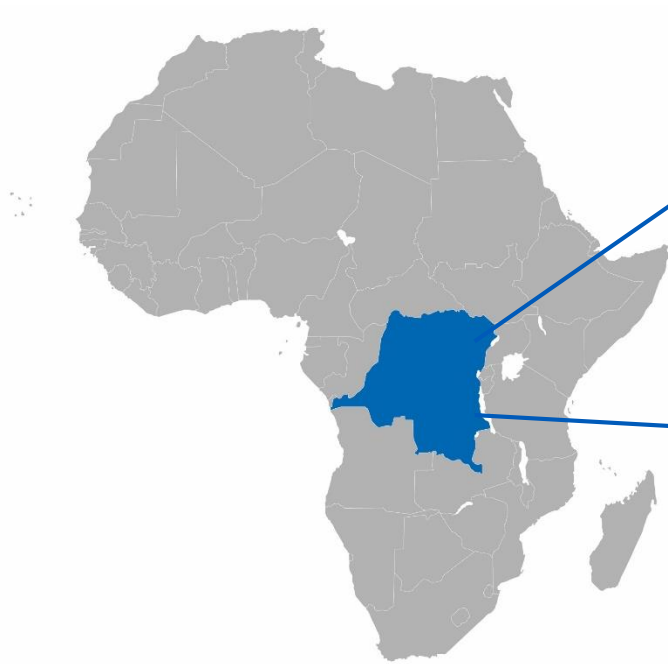
A comprehensive, interlinked Accountability Framework



*Board meeting
22-23 June 2016*

Country example - DRC

TCA Milestones **June 2016**



- Health Zones in 16 high-risk Antennas have microplans
- All refrigerators ordered with GAVI HSS2 funding in 2015 are installed

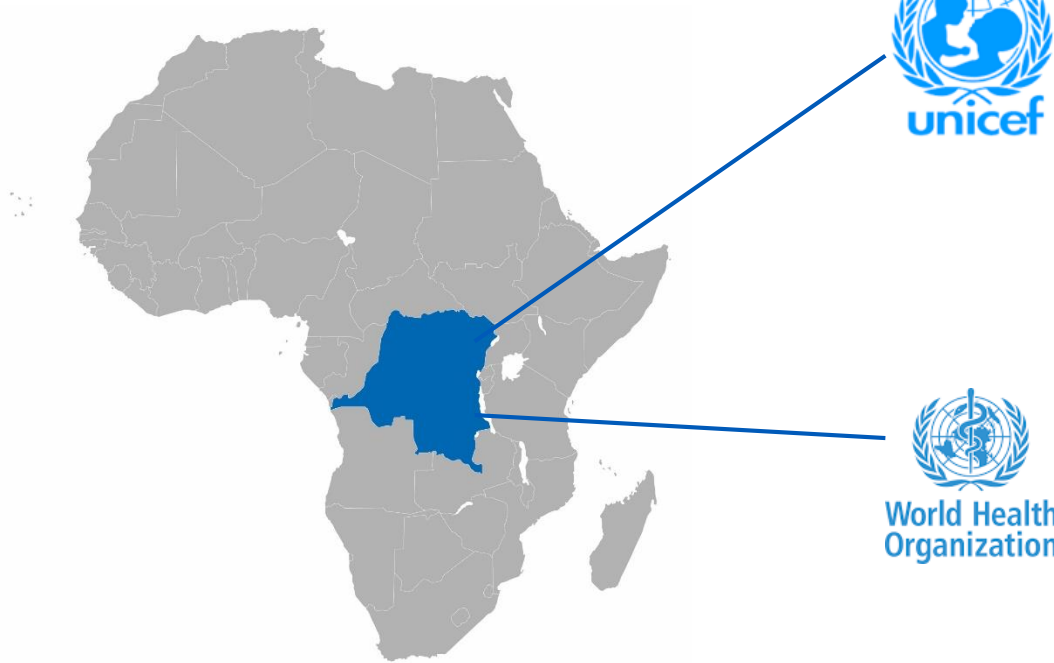


World Health Organization

- Recommendations from EPI review reflected in annual operational plans
- Monthly reporting on measles for early detection of outbreaks

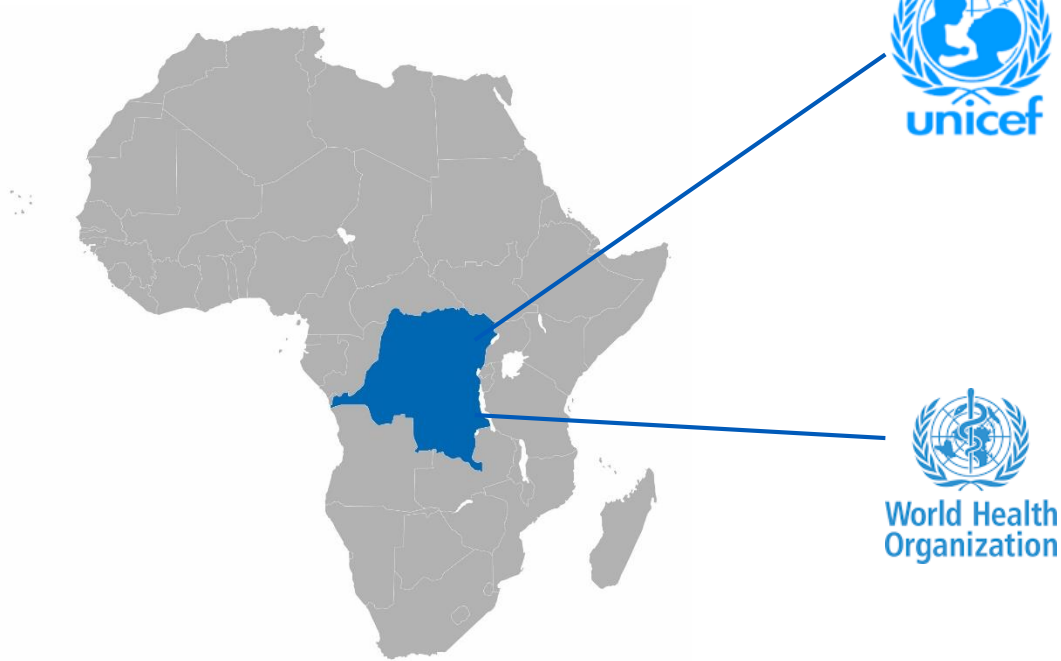
Country example - DRC

December 2016



- 16 high risk Antennas in 10 DPS on track to implement RED approach by antenna
- 4 Cold chain hubs ordered through HSS GAVI funds
- Implementation of the HSS grant
- Sustainable financing plan developed

Country example - DRC



PEF Functions 2016

- Country has identified geographies/ populations with low immunisation coverage and developed a holistic plan to improve equity of immunisation
- Supply chain functioning improves as measured in terms of countries meeting 80% benchmark for Effective Vaccine Management
- Countries achieve 90% of reference coverage of newly introduced vaccine within 2 years
- Countries undertake measles SIAs only after adequate planning and preparation, with the objective of reaching 95% coverage, and that actual achievement of this coverage is measured through independent surveys

In conclusion

Moving forward:

- Effective implementation of planned TA

Key success factors:

- Change management within core partner agencies
- Rapid on-boarding of staff with the right competencies (eg, not automatic transfer of GPEI staff)
- Embracing PEF Functions/TCA deliverables
- Harmonisation of TA across partners



World Health
Organization



THE WORLD BANK
IBRD • IDA | WORLD BANK GROUP



Expanded
partners

THANK YOU



Reach every child

www.gavi.org