



GAVI Alliance

Annual Progress Report **2014**

Submitted by
The Government of
Eritrea

Reporting on year: **2014**

Requesting for support year: **2016**

Date of submission: **15/05/2015**

Deadline for submission: 27/05/2015

Please submit the APR **2014** using the online platform <https://AppsPortal.gavialliance.org/PDExtranet>

Enquiries to: apr@gavi.org 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 <http://www.gavialliance.org/country/>*

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: **2014**

Requesting for support year: **2016**

1.1. NVS & INS support

Type of Support	Current Vaccine	Preferred presentation	Active until
Routine New Vaccines Support	Measles second dose, 10 dose(s) per vial, LYOPHILISED	Measles second dose, 10 dose(s) per vial, LYOPHILISED	2016
Routine New Vaccines Support	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	2015
Routine New Vaccines Support	Rotavirus, 2-dose schedule	Rotavirus, 2-dose schedule	2016
Routine New Vaccines Support	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2016

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

Type of Support	Vaccine	Start year	End year
Routine New Vaccines Support	Measles second dose, 10 dose(s) per vial, LYOPHILISED	2017	2017
Routine New Vaccines Support	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	2016	2021
Routine New Vaccines Support	Rotavirus, 2-dose schedule	2017	2021
Routine New Vaccines Support	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2017	2021

1.3. ISS, HSS, CSO support

Type of Support	Reporting fund utilisation in 2014	Request for Approval of	Eligible For 2014 ISS reward
VIG	Yes	Not applicable	No
HSS	Yes	next tranche of HSS Grant No	No

VIG: Vaccine Introduction Grant; COS: Campaign Operational Support

1.4. Previous Monitoring IRC Report

APR Monitoring IRC Report for year **2013** 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 **Eritrea** 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 **Eritrea**

Please note that this APR will not be reviewed or approved by the High Level Review Panel (HLRP) 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	H.E. Minister Amina Nurhussien	Name	H.E. Minister Brahne Habtemariam
Date		Date	
Signature		Signature	

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

Full name	Position	Telephone	Email
Mr. Tedros Yehdego	EPI Manager	291-1-125367	tedrosmy@gmail.com
Mr. Teggai Kidanemariam	WHO EPI Focal person	291-1-114167	Kidanemariyamihdegot@who.int

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
Dr. Andebrahne Tesfazion Director General of Public Health	Ministry of Health		
Dr. Berhana Haile Director of Family and Community Health	Ministry of Health		

Mr. Tedros Yehdego EPI Mananager	Ministry of Health		
Mr. Teggai Kidanemariam WHO EPI Focal Person	WHO		
Ms.Yodit Hiruy WHO Manternal and Child Health Specialist	UNICEF		
Ms.Abeba Habtom Head of presschool Education	Ministry of Education		
Ms. Yehdga Andehaymanot National Union of Eritrean Women	NUEW		
Mr. Tsuneo Tsurusaki Residence Office of JICA	JICA		
Mr. Tumeszghi Sengal PHC specialist	Mesterhot Privated limited company		

ICC may wish to send informal comments to: apr@gavi.org

All comments will be treated confidentially

Comments from Partners:

Comments from the Regional Working Group:

2.3. HSCC signatures page

We, the undersigned members of the National Health Sector Coordinating Committee (HSCC), **10 May, 2015**, endorse this report on the Health Systems Strengthening Programme. Signature of endorsement of this document does not imply any financial (or legal) commitment on the part of the partner agency or individual.

The GAVI Alliance Transparency and Accountability Policy is an integral part of GAVI Alliance monitoring of country performance. By signing this form the HSCC 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. Furthermore, the HSCC confirms that the content of this report has been based upon accurate and verifiable financial reporting.

Name/Title	Agency/Organization	Signature	Date
Dr. Andom Ogbamariam Director General PPD& HRD	Ministry of Health		

Mr. Tewelde Yohannes Director of Planning Office	Ministry of Health		
Dr. Eyob Terkle Director of Project Management Unit (PMU)	Ministry of Health		
Mr. Tedros Yehdego EPI Manager	Ministry of Health		
Dr.Goitom Mebrahtu Director	Ministry of Health		
Mr. Amanuel Kifle Head of HIMS	Ministry of Health		
Dr. Berhane Debru Director of Research Division	Ministry of Health		
Mr. Samuel Goitom IT Unit head	Ministry of Health		

HSCC may wish to send informal comments to: apr@gavi.org

All comments will be treated confidentially

Comments from Partners:

Comments from the Regional Working Group:

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

Eritrea is not reporting on CSO (Type A & B) fund utilisation in 2015

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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.

Please also note that if the country applies the WHO multi-dose vial policy for IPV, the maximum indicative wastage rates are 5%, 15% and 20% for the 1-dose, 5-dose and 10-dose presentations respectively.

Number	Achievements as per JRF		Targets (preferred presentation)							
	2014		2015		2016		2017		2018	
	Original approved target according to Decision Letter	Reported	Original approved target according to Decision Letter	Current estimation	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation
Total births	117,483	117,483	120,655	120,655	123,913	123,913		127,352		130,790
Total infants' deaths	4,699	4,699	4,826	4,826	5,580	5,580		5,731		5,493
Total surviving infants	112784	112,784	115,829	115,829	118,333	118,333		121,621		125,297
Total pregnant women	117,483	117,483	160,874	160,874	123,913	123,913		127,352		130,790
Number of infants vaccinated (to be vaccinated) with BCG	105,735	83,049	108,590	108,590	117,717	117,717		115,540		124,250
BCG coverage[1]	90 %	71 %	90 %	90 %	95 %	95 %	0 %	91 %	0 %	95 %
Number of infants vaccinated (to be vaccinated) with OPV3	101,506	84,081	104,246	104,246	113,008	113,008		113,108		119,032
OPV3 coverage[2]	90 %	75 %	90 %	90 %	95 %	95 %	0 %	93 %	0 %	95 %
Number of infants vaccinated (to be vaccinated) with DTP1 [3]	104,889	86,751	107,721	107,721	116,578	112,416		115,540		120,285
Number of infants vaccinated (to be vaccinated) with DTP3[3][4]	101,506	84,081	104,246	104,246	113,008	110,589		114,324		119,032
DTP3 coverage[2]	90 %	75 %	90 %	90 %	95 %	93 %	0 %	94 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%) for DTP	5	5	5	5	5	5		5		5
Wastage[5] factor in base-year and planned thereafter for DTP	1.05	1.05	1.05	1.05	1.05	1.05	1.00	1.05	1.00	1.05
Number of infants vaccinated (to be vaccinated) with 1st dose of DTP-HepB-Hib	104,889	86,751	107,721	107,721		112,416		115,540		120,285
Number of infants vaccinated (to be vaccinated) with 3rd dose of DTP-HepB-Hib	101,742	84,081	104,246	104,246		110,589		114,324		119,032
DTP-HepB-Hib coverage[2]	90 %	75 %	90 %	90 %	0 %	93 %	0 %	94 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%)	5	5	5	5		5		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1.05	1.05	1.05	1.05	1	1.05	1	1.05	1	1.05
Maximum wastage rate value for DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %	0 %	5 %	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Pneumococcal (PCV13)		0	94,980	107,721	0	112,416		115,540		120,285

Number	Achievements as per JRF		Targets (preferred presentation)							
	2014		2015		2016		2017		2018	
	Original approved target according to Decision Letter	Reported	Original approved target according to Decision Letter	Current estimation	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation
Number of infants vaccinated (to be vaccinated) with 3rd dose of Pneumococcal (PCV13)		0	0	104,246	0	110,589		114,324		119,032
Pneumococcal (PCV13) coverage[2]	0 %	0 %	0 %	90 %	0 %	93 %	0 %	94 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%)		0	5	5	0	5		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1	1	1.05	1.05	1	1.05	1	1.05	1	1.05
Maximum wastage rate value for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %	0 %	5 %	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Rotavirus	96,266	56,483	92,934	92,934	95,722	112,416		115,540		120,285
Number of infants vaccinated (to be vaccinated) with 2nd dose of Rotavirus	86,638	54,251	83,641	83,641	95,722	110,416		114,324		119,032
Rotavirus coverage[2]	77 %	48 %	72 %	72 %	81 %	93 %	0 %	94 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%)	5	5	5	5	5	5		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1.05	1.05	1.05	1.05	1.05	1.05	1	1.05	1	1.05
Maximum wastage rate value for Rotavirus, 2-dose schedule	0 %	5 %	0 %	5 %	0 %	5 %	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Measles	0	80,551	98,455	98,455	107,060	107,060		109,459		112,767
Number of infants vaccinated (to be vaccinated) with 2nd dose of Measles	90,227	75,640	92,663	92,663	101,113	101,113		103,377		106,502
Measles coverage[2]	80 %	67 %	80 %	80 %	85 %	85 %	0 %	85 %	0 %	85 %
Wastage[5] rate in base-year and planned thereafter (%)	40	40	40	40	40	40		40		40
Wastage[5] factor in base-year and planned thereafter (%)	1.67	1.67	1.67	1.67	1.67	1.67	1	1.67	1	1.67
Maximum wastage rate value for Measles second dose, 10 dose(s) per vial, LYOPHILISED	0.00 %	40.00 %	0.00 %	40.00 %	0.00 %	40.00 %	0.00 %	40.00 %	0.00 %	40.00 %
Pregnant women vaccinated with TT+	54,295	23,553	55,761	55,761	55,761	55,761		57,443		59,166
TT+ coverage[7]	46 %	20 %	35 %	35 %	45 %	45 %	0 %	45 %	0 %	45 %
Vit A supplement to mothers within 6 weeks from delivery	0	0	0	0	0	0		0		0
Vit A supplement to infants after 6 months	509,095	354,820	522,840	522,840	536,957	536,957	N/A	553,066	N/A	569,658
Annual DTP Drop out rate [(DTP1 – DTP3) / DTP1] x 100	3 %	3 %	3 %	3 %	3 %	2 %	0 %	1 %	0 %	1 %

Number	Targets (preferred presentation)					
	2019		2020		2021	
	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation
Total births		134,714		138,755		139,217
Total infants' deaths		5,657		5,827		5,847
Total surviving infants		129,057		132,928		133,370
Total pregnant women		134,714		138,755		139,217
Number of infants vaccinated (to be vaccinated) with BCG		127,998		131,817		132,256
BCG coverage[1]	0 %	95 %	0 %	95 %	0 %	95 %
Number of infants vaccinated (to be vaccinated) with OPV3		122,604		126,282		126,701
OPV3 coverage[2]	0 %	95 %	0 %	95 %	0 %	95 %
Number of infants vaccinated (to be vaccinated) with DTP1[3]		123,894		127,611		128,035
Number of infants vaccinated (to be vaccinated) with DTP3[3][4]		122,604		126,282		126,701
DTP3 coverage[2]	0 %	95 %	0 %	95 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%) for DTP		5		5		5
Wastage[5] factor in base-year and planned thereafter for DTP	1.00	1.05	1.00	1.05	1.00	1.05
Number of infants vaccinated (to be vaccinated) with 1st dose of DTP-HepB-Hib		123,894		127,611		128,035
Number of infants vaccinated (to be vaccinated) with 3rd dose of DTP-HepB-Hib		122,604		126,282		126,701
DTP-HepB-Hib coverage[2]	0 %	95 %	0 %	95 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%)		5		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1	1.05	1	1.05	1	1.05
Maximum wastage rate value for DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Pneumococcal (PCV13)		123,894		127,611		128,035
Number of infants vaccinated (to be vaccinated) with 3rd dose of Pneumococcal (PCV13)		122,604		126,282		126,701
Pneumococcal (PCV13) coverage[2]	0 %	95 %	0 %	95 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%)		5		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1	1.05	1	1.05	1	1.05
Maximum wastage rate value for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %	0 %	5 %

Number	Targets (preferred presentation)					
	2019		2020		2021	
	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation
Number of infants vaccinated (to be vaccinated) with 1st dose of Rotavirus		123,894		127,611		128,035
Number of infants vaccinated (to be vaccinated) with 2nd dose of Rotavirus		122,604		126,282		126,701
Rotavirus coverage[2]	0 %	95 %	0 %	95 %	0 %	95 %
Wastage[5] rate in base-year and planned thereafter (%)		5		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1	1.05	1	1.05	1	1.05
Maximum wastage rate value for Rotavirus, 2-dose schedule	0 %	5 %	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Measles		121,242		124,879		125,295
Number of infants vaccinated (to be vaccinated) with 2nd dose of Measles		109,698		112,988		113,364
Measles coverage[2]	0 %	85 %	0 %	85 %	0 %	85 %
Wastage[5] rate in base-year and planned thereafter (%)		40		40		40
Wastage[5] factor in base-year and planned thereafter (%)	1	1.67	1	1.67	1	1.67
Maximum wastage rate value for Measles second dose, 10 dose(s) per vial, LYOPHILISED	0.00 %	40.00 %	0.00 %	40.00 %	0.00 %	40.00 %
Pregnant women vaccinated with TT+		60,940		62,768		64,651
TT+ coverage[7]	0 %	45 %	0 %	45 %	0 %	46 %
Vit A supplement to mothers within 6 weeks from delivery		0		0		0
Vit A supplement to infants after 6 months	N/A	586,748	N/A	604,350	N/A	622,480
Annual DTP Drop out rate [(DTP1 – DTP3) / DTP1] x 100	0 %	1 %	0 %	1 %	0 %	1 %

[1] Number of infants vaccinated out of total births

[2] Number of infants vaccinated out of total surviving infants

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

[4] Please make sure that the DTP3 cells are correctly populated

[5] The formula to calculate a vaccine wastage rate (in percentage): $[(A - B) / A] \times 100$. Whereby: A = the number of doses distributed for use according to the supply records with correction for stock balance at the end of the supply period; B = the number of vaccinations with the same vaccine in the same period.

[7] Number of pregnant women vaccinated with TT+ out of total pregnant women

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 2014 must be consistent with those that the country reported in the **WHO/UNICEF Joint Reporting Form (JRF) for 2014**. The numbers for 2015 - 2016 in [Table 4 Baseline and Annual Targets](#) 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**

No change was made on birth cohort, number of surviving infants is the same as the previous year we have been projected and used.

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

No change was made on surviving infants.

- 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. For IPV, supporting documentation must also be provided as an attachment(s) to the APR to justify ANY changes in target population.**

No change was made on targets as compared with previous years.

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

Wastage rate for DPT-HepB-Hib and Rotarix of one dose vial vaccines is 5% and it is the same as compared to previous years were used. Wastage rate for measles vaccine is 40% and it is the same as previous year. No change has made for wastage rates of vaccines as compared with the previous years.

5.2. Monitoring the Implementation of GAVI Gender Policy

5.2.1. 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
EPI Coverage Survey	2013	93.4%	92.2

Eritrea Population Health Survey	2010	93.1	92.1
----------------------------------	------	------	------

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

Immunization service is providing in the country in all locality with equally access to gender and ethnicity irrespective of of their residential areas.

5.2.3. If no sex-disaggregated data are available at the moment, do you plan in the future to collect sex-disaggregated coverage estimates? **No**

5.2.4. 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 <http://www.gavialliance.org/about/mission/gender/>)

There is no gender related barrier in accessing vaccination service. Both male and female have equal access to vaccination service in all localities.

5.3. Overall Expenditures and Financing for Immunisation

The purpose of **Table 5.3a** 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\$ = 15	Enter the rate only; Please do not enter local currency name
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Table 5.3a: Overall Expenditure and Financing for Immunisation from all sources (Government and donors) in US\$

Expenditure by category	Expenditure Year 2014	Source of funding						
		Country	GAVI	UNICEF	WHO	JICA	UNICEF	WHO
Traditional Vaccines*	244,800	0	0	244,800	0	0	0	0
New and underused Vaccines**	774,225	56,000	718,225	0	0	0	0	0
Injection supplies (both AD syringes and syringes other than ADs)	99,938	2,000	25,000	72,938	0	0	0	0
Cold Chain equipment	407,500	67,500	0	0	0	340,000	0	0
Personnel	611,667	45,000	100,000	106,667	360,000	0	0	0
Other routine recurrent costs	25,000	0	0	0	25,000	0	0	0
Other Capital Costs	0	0	0	0	0	0	0	0
Campaigns costs	0	0	0	0	0	0	0	0
Not available		0	0	0	0	0	0	0
Total Expenditures for Immunisation	2,163,130							
Total Government Health		170,500	843,225	424,405	385,000	340,000	0	0

Traditional vaccines: BCG, DTP, OPV, 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

5.4. Interagency Coordinating Committee (ICC)

How many times did the ICC meet in 2014? **3**

Please attach the minutes (**Document n° 4**) from the ICC meeting in 2015 endorsing this report.

List the key concerns or recommendations, if any, made by the ICC on sections [5.1 Updated baseline and annual targets](#) to [5.3 Overall Expenditures and Financing for Immunisation](#)

Comments from ICC:

1. Community mobilization and orientation meeting should be carried out in advance at sub nation and district level to disseminate the information on the introduction of PCV and IPV
2. Training and capacity building of the health workers and EPI focal person should be strengthened before the introduction of the new vaccines
3. Local governments and administration should be shared the information of the introduction of the new vaccines in order to scale-up their participation on social mobilization activities.
4. Training of the EPI focal persons at sub national level as earlier as possible before the introduction of the new vaccine.

Are any Civil Society Organisations members of the ICC? **Yes**

If **Yes**, which ones?

List CSO member organisations:
National Union of Eritrean Women (NUEW)
Nation Union of Eritrean Youth and Student (NUEYS)

5.5. Priority actions in 2015 to 2016

What are the country's main objectives and priority actions for its EPI programme for 2015 to 2016

- 1.Introduction of PCV into routine immunization program in July, 2015
- 2.Introduction IPV into routine immunization program in August 2015,
- 3.Measles NIDs in April, 2015
- 4.Cross boarder meeting with Sudan on vaccination and surveillance program for polio eradication initiative.
- 5.Implementation of Sustainable Outreach Service (SOS) in less accessible geographical areas.
- 6.Installation two walk in cold rooms
- 7.Training of health worker on the introduction of new vaccines
- 8.Conducting EVMA in 2016
9. implementation of African Vaccination Week (AVW) to trace vaccine defaulters and conduct social mobilization activities on vaccination.
- 10.EPI Coverage Survey in 2016
- 11.Switch of tOPV to bOPV in 2016
- 12.MLM training for health facility heads and EPI focal points

5.6. Progress of transition plan for injection safety

For all countries, please report on progress of transition plan for injection safety

Please report what types of syringes are used and the funding sources of Injection Safety material in 2014

Vaccine	Types of syringe used in 2014 routine EPI	Funding sources of 2014
BCG	AD Syringes of 0.05ml	UNICEF
Measles	AD Syringres of 0.5ml	GAVI, UNICEF & GOV.
TT	AD Syringe of 0.5ml	UNICEF
DTP-containing vaccine	AD Syringes of 0.5ml	GAVI and GOV.
IPV	AD syringes of 0.5ml	GAVI
PCV	AD Syringes of 0.5ml	GAVI and GOV.

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)

There was no reported problems or obstacles related to injection safety implementation in 2014

Please explain in 2014 how sharps waste is being disposed of, problems encountered, etc.

1. Sharps are collected in safety box of 5 litter at the service level and sent or put to incinerators to burn it at hospital and health center levels.
2. In remote areas and health stations sharps are burned or buried in pit hole.

6. Immunisation Services Support (ISS)

6.1. Report on the use of ISS funds in 2014

Eritrea is not reporting on Immunisation Services Support (ISS) fund utilisation in 2014

6.2. Detailed expenditure of ISS funds during the 2014 calendar year

Eritrea is not reporting on Immunisation Services Support (ISS) fund utilisation in 2014

6.3. Request for ISS reward

Request for ISS reward achievement in Eritrea is not applicable for 2014

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

7.1. Receipt of new & under-used vaccines for 2014 vaccine programme

7.1.1. Did you receive the approved amount of vaccine doses for 2014 Immunisation Programme that GAVI communicated to you in its Decision Letter (DL)? Fill-in table below

Table 7.1: Vaccines received for 2014 vaccinations against approvals for 2014

Please also include any deliveries from the previous year received against this Decision Letter

	[A]	[B]	[C]	
Vaccine type	Total doses for 2014 in Decision Letter	Total doses received by 31 December 2014	Total doses postponed from previous years and received in 2014	Did the country experience any stockouts at any level in 2014?
Measles second dose	150,700	150,700	0	No
DTP-HepB-Hib	302,100	286,750	207,801	No
Rotavirus	126,400	225,000	0	Yes
Pneumococcal (PCV13)	0	0	0	No

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? ...)

Rotarix vaccine was planned to be introduced in July 2014. Because of the logistic delivery problems there was one month delay in the its introduction from the time planned.

- 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.

Chartered plane was used to deliver the vaccines to the country..

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.

At national level there were stock out of Rotarix vaccine in October, 2014 for the duration of two weeks. During the introduction of the new vaccine children born in 2014 was included in the targets (7 months age back) the procured vaccines were for new born children from the introduction date. There was misunderstanding and program error considering that the vaccine procured for the whole targeted children born in the year 2014 and that why the gaps occurred. The expected coverage in the proposal were taken with 81% in calculating the vaccines needs and this was also low as compared to the achieved coverage of Pena 2 coverage of Penta 2 of the same period and this also affects in calculation the vaccine needs.

7.2. Introduction of a New Vaccine in 2014

7.2.1. If you have been approved by GAVI to introduce a new vaccine in 2014, please refer to the vaccine introduction plan in the proposal approved and report on achievements:

DTP-HepB-Hib, 1 dose(s) per vial, LIQUID		
Nationwide introduction	No	
Phased introduction	No	
The time and scale of introduction was as planned in the proposal? If No, Why ?	Yes	The introduction of the vaccine was as planned.

When is the Post Introduction Evaluation (PIE) planned? **July 2012**

Measles second dose, 10 dose(s) per vial, LYOPHILISED		
Nationwide introduction	Yes	19/03/2012
Phased introduction	No	
The time and scale of introduction was as planned in the proposal? If No, Why ?	Yes	

When is the Post Introduction Evaluation (PIE) planned? **March 2016**

Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID		
Nationwide introduction	Yes	01/07/2015
Phased introduction	No	
The time and scale of introduction was as planned in the proposal? If No, Why ?	Yes	Planned for July 2015

When is the Post Introduction Evaluation (PIE) planned? **March 2016**

Rotavirus, 1 dose(s) per vial, ORAL		
Nationwide introduction	Yes	14/08/2014
Phased introduction	No	
The time and scale of introduction was as planned in the proposal? If No, Why ?	No	Delay of vaccine delivery to the country

When is the Post Introduction Evaluation (PIE) planned? **March 2015**

7.2.2. 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)

In March 2015 MCV2 and Rota vaccine Post Introduction Evaluation (PIE) was done at national level in April, 2015 using an external consultants

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**

Does your country have a risk communication strategy with preparedness plans to address vaccine crises? **No**

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? **No**

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? **Yes**

Do you plan to use these sentinel surveillance and/or special studies data to monitor and evaluate the impact of vaccine introduction and use? **No**

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

In 2014, 55 cases of Rota virus caused diarrhea were identified. 24 of them were lab confirmed.

7.3. New Vaccine Introduction Grant lump sums 2014

7.3.1. Financial Management Reporting

	Amount US\$	Amount local currency
Funds received during 2014 (A)	100,000	1,500,000
Remaining funds (carry over) from 2013 (B)	1,122	16,855
Total funds available in 2014 (C=A+B)	101,122	1,516,855
Total Expenditures in 2014 (D)	1,391,642	92,776
Balance carried over to 2015 (E=C-D)	- 1,290,520	1,424,079

Detailed expenditure of New Vaccines Introduction Grant funds during the 2014 calendar year

Please attach a detailed financial statement for the use of New Vaccines Introduction Grant funds in the 2014 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

1. TOT at national level for zonal management team
2. Training of EPI focal persons and health facility heads at sub national level
3. Social mobilization activities and developing health promotional materials for introduction of the new vaccine.
4. Radio and TV Spot key health messages, posters, T-sheets and leaflets
5. Launching ceremony at national and sub national levels
6. community meeting at district levels and using other community gathering opportunity to raise awareness on the introduction of new vaccines.

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

The requested vaccines were not arrived on time according the schedule.

Please describe the activities that will be undertaken with any remaining balance of funds for 2015 onwards

There remaining funds will allocated for strengthening routine vaccination activities such conducting outreach services in less accessible areas and supervision activities.

7.4. Report on country co-financing in 2014

Table 7.4 : Five questions on country co-financing

Q.1: What were the actual co-financed amounts and doses in 2014?		
Co-Financed Payments	Total Amount in US\$	Total Amount in Doses
Awarded Vaccine #1: DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	72,482	20,650
Awarded Vaccine #2: Measles second dose, 10 dose(s) per vial, LYOPHILISED	0	0
Awarded Vaccine #3: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0	0
Awarded Vaccine #4: Rotavirus, 1 dose(s) per vial, ORAL	14,682	6,000
Q.2: Which were the amounts of funding for country co-financing in reporting year 2014 from the following sources?		
Government	87,164	
Donor	0	
Other	0	
Q.3: Did you procure related injections supplies for the co-financing vaccines? What were the amounts in US\$ and supplies?		
Co-Financed Payments	Total Amount in US\$	Total Amount in Doses
Awarded Vaccine #1: DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	2,000	25,800
Awarded Vaccine #2: Measles second dose, 10 dose(s) per vial, LYOPHILISED	0	0
Awarded Vaccine #3: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0	0
Awarded Vaccine #4: Rotavirus, 1 dose(s) per vial, ORAL	0	0
Q.4: When do you intend to transfer funds for co-financing in 2016 and what is the expected source of this funding		

Schedule of Co-Financing Payments	Proposed Payment Date for 2016	Source of funding
Awarded Vaccine #1: DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	March	GOV.
Awarded Vaccine #2: Measles second dose, 10 dose(s) per vial, LYOPHILISED		NA
Awarded Vaccine #3: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	March	GOV.
Awarded Vaccine #4: Rotavirus, 1 dose(s) per vial, ORAL	March	GOV.
	Q.5: Please state any Technical Assistance needs for developing financial sustainability strategies, mobilising funding for immunization, including for co-financing	
	Providing training on financial sustainability strategies for higher level authorities could advocate them to increase co-financing level and give more attention and feels owner ship of the immunization program to strengthen it.	

*Note: co-financing is not mandatory for IPV

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

http://www.who.int/immunization/programmes_systems/supply_chain/evm/en/index3.html

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? **December 2012**

Please attach:

- EVM assessment (**Document No 12**)
- Improvement plan after EVM (**Document No 13**)
- 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? **No**

If yes, provide details

The jointly developed improvement plan of EVM was implemented according the schedule. About 95% of the planned activities were implemented according the time line. For detailed information the document will be attached as annex.

When is the next Effective Vaccine Management (EVM) assessment planned? **March 2016**

7.6. Monitoring GAVI Support for Preventive Campaigns in 2014

Eritrea does not report on NVS Preventive campaign

7.7. Change of vaccine presentation

Eritrea does not require to change any of the vaccine presentation(s) for future years.

7.8. Renewal of multi-year vaccines support for those countries whose current support is ending in 2015

If 2015 is the last year of approved multiyear support for a certain vaccine and the country wishes to extend GAVI support, the country should request for an extension of the co-financing agreement with GAVI for vaccine support starting from 2016 and for the duration of a new Comprehensive Multi-Year Plan (cMYP).

The country hereby requests an extension of GAVI support for the years 2016 to 2021 for the following vaccines:

- * **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**
- * **Measles second dose, 10 dose(s) per vial, LYOPHILISED**
- * **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- * **Rotavirus, 2-dose schedule**

At the same time it commits itself to co-finance the procurement of the following vaccines in accordance with the minimum Gavi co-financing levels as summarised in section [7.11 Calculation of requirements](#).

- * **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**
- * **Measles second dose, 10 dose(s) per vial, LYOPHILISED**
- * **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- * **Rotavirus, 2-dose schedule**

The multi-year support extension is in line with the new cMYP for the years 2016 to 2021, which is attached to this APR (Document N°16). The new costing tool is also attached (Document N°17) for the following vaccines:

- * **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**
- * **Measles second dose, 10 dose(s) per vial, LYOPHILISED**
- * **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- * **Rotavirus, 2-dose schedule**

The country ICC has endorsed this request for extended support of the following vaccines at the ICC meeting whose minutes are attached to this APR. (Document N°18)

- * **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**
- * **Measles second dose, 10 dose(s) per vial, LYOPHILISED**
- * **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**
- * **Rotavirus, 2-dose schedule**

7.9. Request for continued support for vaccines for 2016 vaccination programme

In order to request NVS support for 2016 vaccination do the following

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

Yes

If you don't confirm, please explain

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 Antigen	Vaccine Type	2008	2009	2010	2011	2012	2013	2014
DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID							3.40 %
Measles second dose, 10 dose(s) per vial, LYOPHILISED	Measles second dose, 10 dose(s) per vial, LYOPHILISED							13.80 %
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID							4.40 %
Rotavirus, 2-dose schedule	Rotavirus, 2-dose schedule							3.90 %

Vaccine Antigen	Vaccine Type	2015	2016	2017	2018	2019	2020	2021
DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	3.50 %	3.60 %	4.40 %	4.40 %	4.40 %	4.40 %	4.40 %
Measles second dose, 10 dose(s) per vial, LYOPHILISED	Measles second dose, 10 dose(s) per vial, LYOPHILISED	13.00 %	12.60 %	12.30 %	12.00 %	11.80 %	11.40 %	11.40 %
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	4.50 %	3.00 %	4.50 %	4.60 %	3.10 %	3.10 %	3.10 %
Rotavirus, 2-dose schedule	Rotavirus, 2-dose schedule	4.20 %	4.40 %	4.40 %	4.40 %	4.40 %	4.40 %	4.40 %

7.11. Calculation of requirements

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

ID	Source		2014	2015	2016	2017	2018
Number of surviving infants	Parameter	#	112,784	115,829	118,333	121,621	125,297
Number of children to be vaccinated with the first dose	Parameter	#	104,889	107,721	112,416	115,540	120,285
Number of children to be vaccinated with the third dose	Parameter	#	101,742	104,246	110,589	114,324	119,032
Immunisation coverage with the third dose	Parameter	%	90.21 %	90.00 %	93.46 %	94.00 %	95.00 %
Number of doses per child	Parameter	#	3	3	3	3	3
Estimated vaccine wastage factor	Parameter	#	1.05	1.05	1.05	1.05	1.05
Stock in Central Store Dec 31, 2014		#	251,750				
Stock across second level Dec 31, 2014 (if available)*		#	251,750				
Stock across third level Dec 31, 2014 (if available)*	Parameter	#					
Number of doses per vial	Parameter	#		1	1	1	1

	AD syringes required	Parameter	#		Yes	Yes	Yes	Yes
	Reconstitution syringes required	Parameter	#		No	No	No	No
	Safety boxes required	Parameter	#		Yes	Yes	Yes	Yes
cc	Country co-financing per dose	Parameter	\$		0.20	0.20	0.20	0.20
ca	AD syringe price per unit	Parameter	\$		0.0448	0.0448	0.0448	0.0448
cr	Reconstitution syringe price per unit	Parameter	\$		0	0	0	0
cs	Safety box price per unit	Parameter	\$		0.0054	0.0054	0.0054	0.0054
fv	Freight cost as % of vaccines value	Parameter	%		3.50 %	3.60 %	4.40 %	4.40 %

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

There was no difference between the stock balance of December 31st 2014 and January 1st 2015.

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.

3

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

Co-financing group	Low
---------------------------	-----

	2014	2015	2016	2017	2018
Minimum co-financing	0.20	0.20	0.20	0.20	0.20
Recommended co-financing as per			0.20	0.20	0.20
Your co-financing	0.20	0.20	0.20	0.20	0.20

	2019	2020	2021
Minimum co-financing	0.20	0.20	0.20
Recommended co-financing as per	0.20	0.20	0.20
Your co-financing	0.20	0.20	0.20

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

		2014	2015	2016	2017	2018
Number of vaccine doses	#	272,600	247,900	219,900	394,200	410,400
Number of AD syringes	#	314,900	285,400	252,600	479,000	498,700
Number of re-constitution syringes	#	0	0	0	0	0
Number of safety boxes	#	3,500	3,150	2,725	5,000	5,200
Total value to be co-financed by GAVI	\$	577,000	514,500	419,500	628,500	654,000

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

		2019	2020	2021
Number of vaccine doses	#	422,700	435,200	436,700
Number of AD syringes	#	513,700	529,100	530,900
Number of re-constitution syringes	#	0	0	0
Number of safety boxes	#	5,350	5,525	5,525
Total value to be co-financed by GAVI	\$	674,000	692,000	694,000

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

		2014	2015	2016	2017	2018
Number of vaccine doses	#	29,500	27,500	26,500	58,600	61,000
Number of AD syringes	#	0	0	0	0	0
Number of re-constitution syringes	#	0	0	0	0	0
Number of safety boxes	#	0	0	0	0	0
Total value to be co-financed by the Country [1]	\$	60,500	55,500	50,500	93,500	97,500

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

		2019	2020	2021
Number of vaccine doses	#	62,800	64,900	65,100
Number of AD syringes	#	0	0	0
Number of re-constitution syringes	#	0	0	0
Number of safety boxes	#	0	0	0
Total value to be co-financed by the Country [1]	\$	100,500	103,500	103,500

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

		Formula	2014	2015		
				Total	Government	GAVI
A	Country co-finance	V				
B	Number of children to be vaccinated with the first dose	Table 4	104,889	107,721		
B1	Number of children to be vaccinated with the third dose	Table 4	101,742	107,721		
C	Number of doses per child	Vaccine parameter (schedule)	3	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	310,230	318,264		
E	Estimated vaccine wastage factor	Table 4	1.05	1.05		
F	Number of doses needed including wastage	$D \times E$		334,177		
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> if(wastage factor of previous year current estimation < wastage factor of previous year original approved): $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ else: $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 				
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$				
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$				
H2	Reported stock on January 1st	Table 7.11.1	195,000	251,750		
H3	Shipment plan	Approved volume		275,400		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$		275,400		
J	Number of doses per vial	Vaccine Parameter				
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$				
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$				
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$				
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$				
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$				
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$				
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$				
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$				
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$				
T	Total fund needed	$(N+O+P+Q+R+S)$				
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$				
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$				

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, 1 dose(s) per vial, LIQUID** (part 2)

		Formula	2016		
			Total	Government	GAVI
A	Country co-finance	V	10.74 %		
B	Number of children to be vaccinated with the first dose	Table 4	112,416	12,077	100,339
B1	Number of children to be vaccinated with the third dose	Table 4	110,589	11,881	98,708
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	334,672	35,954	298,718
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	351,406	37,752	313,654
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> <i>if (wastage factor of previous year current estimation < wastage factor of previous year original approved):</i> $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ <i>else:</i> $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 	4,308	463	3,845
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$	109,430	11,756	97,674
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$	192,974	20,731	172,243
H2	Reported stock on January 1st	Table 7.11.1			
H3	Shipment plan	Approved volume			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	246,300	26,460	219,840
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	252,506	0	252,506
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	2,710	0	2,710
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	442,602	47,549	395,053
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	11,313	0	11,313
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	15	0	15
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	15,934	1,712	14,222
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	469,864	50,477	419,387
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	49,260		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	10.74 %		

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, 1 dose(s) per vial, LIQUID** (part 3)

		Formula	2017		
			Total	Government	GAVI
A	Country co-finance	V	12.94 %		
B	Number of children to be vaccinated with the first dose	Table 4	115,540	14,946	100,594
B1	Number of children to be vaccinated with the third dose	Table 4	114,324	14,789	99,535
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	344,906	44,615	300,291
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	362,151	46,846	315,305
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> if $(\text{wastage factor of previous year current estimation} < \text{wastage factor of previous year original approved})$: $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ else: $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 	90,538	11,712	78,826
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$			
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$			
H2	Reported stock on January 1st	Table 7.11.1			
H3	Shipment plan	Approved volume			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	452,700	58,558	394,142
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	478,989	0	478,989
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	4,980	0	4,980
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	670,449	86,725	583,724
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	21,459	0	21,459
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	28	0	28
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	29,500	3,816	25,684
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	721,436	93,320	628,116
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	90,540		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %		

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, 1 dose(s) per vial, LIQUID** (part 4)

		Formula	2018		
			Total	Government	GAVI
A	Country co-finance	V	12.94 %		
B	Number of children to be vaccinated with the first dose	Table 4	120,285	15,560	104,725
B1	Number of children to be vaccinated with the third dose	Table 4	119,032	15,398	103,634
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	359,089	46,449	312,640
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	377,043	48,772	328,271
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> if $(\text{wastage factor of previous year current estimation} < \text{wastage factor of previous year original approved})$: $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ else: $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 	94,261	12,193	82,068
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$			
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$			
H2	Reported stock on January 1st	Table 7.11.1			
H3	Shipment plan	Approved volume			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	471,350	60,971	410,379
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	498,686	0	498,686
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,185	0	5,185
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	698,070	90,297	607,773
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	22,342	0	22,342
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	29	0	29
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	30,716	3,974	26,742
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	751,157	97,164	653,993
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	94,270		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %		

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, 1 dose(s) per vial, LIQUID (part 5)

		Formula	2019		
			Total	Government	GAVI
A	Country co-finance	V	12.94 %		
B	Number of children to be vaccinated with the first dose	Table 4	123,894	16,026	107,868
B1	Number of children to be vaccinated with the third dose	Table 4	122,604	15,860	106,744
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	369,864	47,843	322,021
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	388,357	50,235	338,122
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> if $(\text{wastage factor of previous year current estimation} < \text{wastage factor of previous year original approved})$: $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ else: $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 	97,090	12,559	84,531
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$			
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$			
H2	Reported stock on January 1st	Table 7.11.1			
H3	Shipment plan	Approved volume			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	485,450	62,795	422,655
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	513,650	0	513,650
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,340	0	5,340
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	718,952	92,999	625,953
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,012	0	23,012
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0	30
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	31,634	4,092	27,542
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	773,628	100,071	673,557
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	97,090		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %		

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, 1 dose(s) per vial, LIQUID** (part 6)

		Formula	2020		
			Total	Government	GAVI
A	Country co-finance	V	12.97 %		
B	Number of children to be vaccinated with the first dose	Table 4	127,611	16,552	111,059
B1	Number of children to be vaccinated with the third dose	Table 4	126,282	16,380	109,902
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	380,960	49,412	331,548
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	400,008	51,883	348,125
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> if $(\text{wastage factor of previous year current estimation} < \text{wastage factor of previous year original approved})$: $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ else: $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 	100,002	12,971	87,031
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$			
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$			
H2	Reported stock on January 1st	Table 7.11.1			
H3	Shipment plan	Approved volume			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	500,050	64,858	435,192
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	529,059	0	529,059
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,501	0	5,501
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	738,574	95,795	642,779
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,702	0	23,702
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0	30
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,498	4,216	28,282
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	794,804	103,089	691,715
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,010		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %		

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, 1 dose(s) per vial, LIQUID** (part 7)

	Formula	2021		
		Total	Government	GAVI
A	Country co-finance	V	12.97 %	
B	Number of children to be vaccinated with the first dose	Table 4	128,035	16,607
B1	Number of children to be vaccinated with the third dose	Table 4	126,701	16,434
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	382,225	49,576
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	401,336	52,055
G	Vaccines buffer stock	<p>Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted =</p> <ul style="list-style-type: none"> if $(\text{wastage factor of previous year current estimation} < \text{wastage factor of previous year original approved})$: $((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.25$ else: $(F - D - ((F - D) \text{ of previous year original approved})) \times 0.25 \geq 0$ 	100,335	13,014
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.25)$		
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$		
H2	Reported stock on January 1st	Table 7.11.1		
H3	Shipment plan	Approved volume		
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	501,700	65,072
J	Number of doses per vial	Vaccine Parameter	1	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	530,816	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,519	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	741,011	96,112
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,781	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	31	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,605	4,229
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	797,428	103,429
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,340	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %	

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 7.11.1: Specifications for Measles second dose, 10 dose(s) per vial, LYOPHILISED

ID	Source		2014	2015	2016	2017	TOTAL	
	Number of surviving infants	Parameter	#	112,784	115,829	118,333	121,621	468,567
	Number of children to be vaccinated with the first dose	Parameter	#	0	98,455	107,060	109,459	314,974
	Number of children to be vaccinated with the second dose	Parameter	#	90,227	92,663	101,113	103,377	387,380
	Immunisation coverage with the second dose	Parameter	%	80.00 %	80.00 %	85.45 %	85.00 %	
	Number of doses per child	Parameter	#	1	1	1	1	
	Estimated vaccine wastage factor	Parameter	#	1.67	1.67	1.67	1.67	
	Stock in Central Store Dec 31, 2014		#	218,900				
	Stock across second level Dec 31, 2014 (if available)*		#	218,900				
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#					
	Number of doses per vial	Parameter	#		10	10	10	
	AD syringes required	Parameter	#		Yes	Yes	Yes	
	Reconstitution syringes required	Parameter	#		Yes	Yes	Yes	
	Safety boxes required	Parameter	#		Yes	Yes	Yes	
cc	Country co-financing per dose	Parameter	\$		0.00	0.00	0.00	
ca	AD syringe price per unit	Parameter	\$		0.0448	0.0448	0.0448	
cr	Reconstitution syringe price per unit	Parameter	\$		0	0	0	
cs	Safety box price per unit	Parameter	\$		0.0054	0.0054	0.0054	
fv	Freight cost as % of vaccines value	Parameter	%		13.00 %	12.60 %	12.30 %	
fd	Freight cost as % of devices value	Parameter	%					

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

In December, 2014 recounting of the vaccine dose was made and the amount of vaccines carried fore ward for the next year was determined and taken as the beginning stock balance for 2015 as of 1st January. There was no difference in the stock balance of the vaccines.

Co-financing tables for Measles second dose, 10 dose(s) per vial, LYOPHILISED

Co-financing group	Low
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	2014	2015	2016	2017
Minimum co-financing				
Recommended co-financing as per				
Your co-financing				

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-finance	V			
B	Number of children to be vaccinated with the second dose	Table 4	90,227	92,663	
C	Number of doses per child	Vaccine parameter (schedule)	1	1	
D	Number of doses needed	$B \times C$	0	98,455	
E	Estimated vaccine wastage factor	Table 4	1.67	1.67	
F	Number of doses needed including wastage	$D \times E$		164,420	
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$			
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1	0	218,900	
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$		123,600	
J	Number of doses per vial	Vaccine Parameter			
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$			
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$			
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$			
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$			
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$			
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$			
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$			
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$			
T	Total fund needed	$(N+O+P+Q+R+S)$			
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$			
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$			

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 2)

	Formula	2016		
		Total	Government	GAVI
A	Country co-finance	V	0.00 %	
B	Number of children to be vaccinated with the second dose	Table 4	101,113	0
C	Number of doses per child	Vaccine parameter (schedule)	1	
D	Number of doses needed	$B \times C$	107,060	0
E	Estimated vaccine wastage factor	Table 4	1.67	
F	Number of doses needed including wastage	$D \times E$	178,791	0
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	3,593	0
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$	177,795	0
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	4,600	0
J	Number of doses per vial	Vaccine Parameter	10	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	- 73,856	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	507	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	51	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	1,238	0
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	- 3,308	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	18	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	1	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	156	0
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	- 1,895	0
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	0.00 %	

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 3)

		Formula	2017		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the second dose	Table 4	103,377	0	103,377
C	Number of doses per child	Vaccine parameter (schedule)	1		
D	Number of doses needed	$B \times C$	109,459	0	109,459
E	Estimated vaccine wastage factor	Table 4	1.67		
F	Number of doses needed including wastage	$D \times E$	182,797	0	182,797
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	1,002	0	1,002
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	183,800	0	183,800
J	Number of doses per vial	Vaccine Parameter	10		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	121,508	0	121,508
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	20,218	0	20,218
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	2,022	0	2,022
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	50,729	0	50,729
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	5,444	0	5,444
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	708	0	708
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	11	0	11
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	6,240	0	6,240
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	63,132	0	63,132
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	0.00 %		

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 4)

		Formula	2018		
			Total	Government	GAVI
A	Country co-finance	V	12.94 %		
B	Number of children to be vaccinated with the second dose	Table 4	120,285	15,560	104,725
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	359,089	46,449	312,640
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	377,043	48,772	328,271
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	94,261	12,193	82,068
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	471,350	60,971	410,379
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	498,686	0	498,686
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,185	0	5,185
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	698,070	90,297	607,773
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	22,342	0	22,342
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	29	0	29
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	30,716	3,974	26,742
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	751,157	97,164	653,993
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	94,270		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %		

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 5)

		Formula	2019		
			Total	Government	GAVI
A	Country co-finance	V	12.94 %		
B	Number of children to be vaccinated with the second dose	Table 4	123,894	16,026	107,868
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	369,864	47,843	322,021
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	388,357	50,235	338,122
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	97,090	12,559	84,531
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	485,450	62,795	422,655
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	513,650	0	513,650
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,340	0	5,340
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	718,952	92,999	625,953
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,012	0	23,012
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0	30
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	31,634	4,092	27,542
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	773,628	100,071	673,557
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	97,090		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %		

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 6)

		Formula	2020		
			Total	Government	GAVI
A	Country co-finance	V	12.97 %		
B	Number of children to be vaccinated with the second dose	Table 4	127,611	16,552	111,059
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	380,960	49,412	331,548
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	400,008	51,883	348,125
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	100,002	12,971	87,031
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	500,050	64,858	435,192
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	529,059	0	529,059
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,501	0	5,501
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	738,574	95,795	642,779
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,702	0	23,702
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0	30
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,498	4,216	28,282
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	794,804	103,089	691,715
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,010		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %		

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 7)

	Formula	2021			
		Total	Government	GAVI	
A	Country co-finance	V	12.97 %		
B	Number of children to be vaccinated with the second dose	Table 4	128,035	16,607	111,428
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	382,225	49,576	332,649
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	401,336	52,055	349,281
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	100,335	13,014	87,321
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	501,700	65,072	436,628
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	530,816	0	530,816
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,519	0	5,519
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	741,011	96,112	644,899
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,781	0	23,781
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	31	0	31
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,605	4,229	28,376
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	797,428	103,429	693,999
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,340		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %		

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

ID	Source		2014	2015	2016	2017	2018	
	Number of surviving infants	Parameter	#	112,784	115,829	118,333	121,621	125,297
	Number of children to be vaccinated with the first dose	Parameter	#	0	94,980	112,416	115,540	120,285
	Number of children to be vaccinated with the third dose	Parameter	#		0	110,589	114,324	119,032
	Immunisation coverage with the third dose	Parameter	%	0.00 %	0.00 %	93.46 %	94.00 %	95.00 %
	Number of doses per child	Parameter	#	3	3	3	3	3
	Estimated vaccine wastage factor	Parameter	#	1.00	1.05	1.05	1.05	1.05
	Stock in Central Store Dec 31, 2014		#	0				

	Stock across second level Dec 31, 2014 (if available)*		#	0				
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#					
	Number of doses per vial	Parameter	#		1	1	1	1
	AD syringes required	Parameter	#		Yes	Yes	Yes	Yes
	Reconstitution syringes required	Parameter	#		No	No	No	No
	Safety boxes required	Parameter	#		Yes	Yes	Yes	Yes
cc	Country co-financing per dose	Parameter	\$		0.20	0.20	0.20	0.20
ca	AD syringe price per unit	Parameter	\$		0.0448	0.0448	0.0448	0.0448
cr	Reconstitution syringe price per unit	Parameter	\$		0	0	0	0
cs	Safety box price per unit	Parameter	\$		0.0054	0.0054	0.0054	0.0054
fv	Freight cost as % of vaccines value	Parameter	%		4.50 %	3.00 %	4.50 %	4.60 %

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

PCV vaccine is not introduced

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

Co-financing group	Low
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	2014	2015	2016	2017	2018
Minimum co-financing		0.20	0.20	0.20	0.20
Recommended co-financing as per			0.20	0.20	0.20
Your co-financing		0.20	0.20	0.20	0.20

	2019	2020	2021
Minimum co-financing	0.20	0.20	0.20
Recommended co-financing as per	0.20	0.20	0.20
Your co-financing	0.20	0.20	0.20

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-finance	V			
B	Number of children to be vaccinated with the second dose	Table 4	90,227	92,663	
C	Number of doses per child	Vaccine parameter (schedule)	1	1	
D	Number of doses needed	$B \times C$	0	98,455	
E	Estimated vaccine wastage factor	Table 4	1.67	1.67	
F	Number of doses needed including wastage	$D \times E$		164,420	
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$			
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1	0	218,900	
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$		123,600	
J	Number of doses per vial	Vaccine Parameter			
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$			
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$			
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$			
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$			
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$			
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$			
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$			
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$			
T	Total fund needed	$(N+O+P+Q+R+S)$			
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$			
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$			

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 2)

		Formula	2016		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the second dose	Table 4	101,113	0	101,113
C	Number of doses per child	Vaccine parameter (schedule)	1		
D	Number of doses needed	$B \times C$	107,060	0	107,060
E	Estimated vaccine wastage factor	Table 4	1.67		
F	Number of doses needed including wastage	$D \times E$	178,791	0	178,791
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	3,593	0	3,593
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$	177,795	0	177,795
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	4,600	0	4,600
J	Number of doses per vial	Vaccine Parameter	10		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	- 73,856	0	- 73,856
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	507	0	507
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	51	0	51
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	1,238	0	1,238
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	- 3,308	0	- 3,308
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	18	0	18
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	1	0	1
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	156	0	156
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	- 1,895	0	- 1,895
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	0.00 %		

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 3)

	Formula	2017		
		Total	Government	GAVI
A	Country co-finance	V	0.00 %	
B	Number of children to be vaccinated with the second dose	Table 4	103,377	0
C	Number of doses per child	Vaccine parameter (schedule)	1	
D	Number of doses needed	$B \times C$	109,459	0
E	Estimated vaccine wastage factor	Table 4	1.67	
F	Number of doses needed including wastage	$D \times E$	182,797	0
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	1,002	0
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$		
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	183,800	0
J	Number of doses per vial	Vaccine Parameter	10	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	121,508	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	20,218	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	2,022	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	50,729	0
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	5,444	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	708	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	11	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	6,240	0
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	63,132	0
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	0.00 %	

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 4)

	Formula	2018		
		Total	Government	GAVI
A	Country co-finance	V	12.94 %	
B	Number of children to be vaccinated with the second dose	Table 4	120,285	15,560
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B \times C$	359,089	46,449
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	377,043	48,772
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	94,261	12,193
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$		
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	471,350	60,971
J	Number of doses per vial	Vaccine Parameter	1	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	498,686	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,185	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	698,070	90,297
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	22,342	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	29	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	30,716	3,974
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	751,157	97,164
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	94,270	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %	

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 5)

	Formula	2019		
		Total	Government	GAVI
A	Country co-finance	V	12.94 %	
B	Number of children to be vaccinated with the second dose	Table 4	123,894	16,026
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B \times C$	369,864	47,843
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	388,357	50,235
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	97,090	12,559
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$		
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	485,450	62,795
J	Number of doses per vial	Vaccine Parameter	1	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	513,650	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,340	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	718,952	92,999
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,012	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	31,634	4,092
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	773,628	100,071
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	97,090	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %	

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 6)

	Formula	2020		
		Total	Government	GAVI
A	Country co-finance	V	12.97 %	
B	Number of children to be vaccinated with the second dose	Table 4	127,611	16,552
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B \times C$	380,960	49,412
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	400,008	51,883
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	100,002	12,971
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$		
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	500,050	64,858
J	Number of doses per vial	Vaccine Parameter	1	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	529,059	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,501	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	738,574	95,795
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,702	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,498	4,216
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	794,804	103,089
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,010	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %	

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 7)

	Formula	2021			
		Total	Government	GAVI	
A	Country co-finance	V	12.97 %		
B	Number of children to be vaccinated with the second dose	Table 4	128,035	16,607	111,428
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	382,225	49,576	332,649
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	401,336	52,055	349,281
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	100,335	13,014	87,321
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	501,700	65,072	436,628
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	530,816	0	530,816
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,519	0	5,519
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	741,011	96,112	644,899
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,781	0	23,781
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	31	0	31
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,605	4,229	28,376
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	797,428	103,429	693,999
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,340		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %		

Table 7.11.1: Specifications for **Rotavirus, 2-dose schedule**

ID	Source		2014	2015	2016	2017	2018	
	Number of surviving infants	Parameter	#	112,784	115,829	118,333	121,621	125,297
	Number of children to be vaccinated with the first dose	Parameter	#	96,266	92,934	112,416	115,540	120,285
	Number of children to be vaccinated with the second dose	Parameter	#	86,638	83,641	110,416	114,324	119,032
	Immunisation coverage with the second dose	Parameter	%	76.82 %	72.21 %	93.31 %	94.00 %	95.00 %
	Number of doses per child	Parameter	#	2	2	2	2	2
	Estimated vaccine wastage factor	Parameter	#	1.05	1.05	1.05	1.05	1.05
	Stock in Central Store Dec 31, 2014		#	79,900				

	Stock across second level Dec 31, 2014 (if available)*		#	79,900				
	Stock across third level Dec 31, 2014 (if available)*	Parameter	#					
	Number of doses per vial	Parameter	#		1	1	1	1
	AD syringes required	Parameter	#		No	No	No	No
	Reconstitution syringes required	Parameter	#		No	No	No	No
	Safety boxes required	Parameter	#		No	No	No	No
cc	Country co-financing per dose	Parameter	\$		0.20	0.20	0.20	0.20
ca	AD syringe price per unit	Parameter	\$		0.0448	0.0448	0.0448	0.0448
cr	Reconstitution syringe price per unit	Parameter	\$		0	0	0	0
cs	Safety box price per unit	Parameter	\$		0.0054	0.0054	0.0054	0.0054
fv	Freight cost as % of vaccines value	Parameter	%		4.20 %	4.40 %	4.40 %	4.40 %

* Please describe the method used for stock count in the text box below. We assume the closing stock (Dec 31, 2014) is the same as the opening stock (Jan 1, {1}). If there is a difference, please provide details in the text box below.

There was difference between the stock of December 31st 2014 and January 1st 2015

Co-financing tables for **Rotavirus, 2-dose schedule**

Co-financing group	Low
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	2014	2015	2016	2017	2018
Minimum co-financing	0.20	0.20	0.20	0.20	0.20
Recommended co-financing as per			0.20	0.20	0.20
Your co-financing	0.20	0.20	0.20	0.20	0.20

	2019	2020	2021
Minimum co-financing	0.20	0.20	0.20
Recommended co-financing as per	0.20	0.20	0.20
Your co-financing	0.20	0.20	0.20

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 1)

	Formula	2014	2015		
			Total	Government	GAVI
A	Country co-finance	V			
B	Number of children to be vaccinated with the second dose	Table 4	90,227	92,663	
C	Number of doses per child	Vaccine parameter (schedule)	1	1	
D	Number of doses needed	$B \times C$	0	98,455	
E	Estimated vaccine wastage factor	Table 4	1.67	1.67	
F	Number of doses needed including wastage	$D \times E$		164,420	
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$			
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1	0	218,900	
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$		123,600	
J	Number of doses per vial	Vaccine Parameter			
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$			
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$			
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$			
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$			
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$			
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$			
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$			
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$			
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$			
T	Total fund needed	$(N+O+P+Q+R+S)$			
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$			
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$			

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 2)

		Formula	2016		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the second dose	Table 4	101,113	0	101,113
C	Number of doses per child	Vaccine parameter (schedule)	1		
D	Number of doses needed	$B \times C$	107,060	0	107,060
E	Estimated vaccine wastage factor	Table 4	1.67		
F	Number of doses needed including wastage	$D \times E$	178,791	0	178,791
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	3,593	0	3,593
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$	177,795	0	177,795
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	4,600	0	4,600
J	Number of doses per vial	Vaccine Parameter	10		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	- 73,856	0	- 73,856
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	507	0	507
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	51	0	51
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	1,238	0	1,238
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	- 3,308	0	- 3,308
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	18	0	18
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	1	0	1
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	156	0	156
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	- 1,895	0	- 1,895
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	0.00 %		

Table 7.11.4: Calculation of requirements for **Measles second dose, 10 dose(s) per vial, LYOPHILISED** (part 3)

	Formula	2017		
		Total	Government	GAVI
A	Country co-finance	V	0.00 %	
B	Number of children to be vaccinated with the second dose	Table 4	103,377	0
C	Number of doses per child	Vaccine parameter (schedule)	1	
D	Number of doses needed	$B \times C$	109,459	0
E	Estimated vaccine wastage factor	Table 4	1.67	
F	Number of doses needed including wastage	$D \times E$	182,797	0
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	1,002	0
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$		
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	183,800	0
J	Number of doses per vial	Vaccine Parameter	10	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	121,508	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	20,218	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	2,022	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	50,729	0
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	5,444	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	708	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	11	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	6,240	0
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	63,132	0
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	0.00 %	

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 4)

		Formula	2018		
			Total	Government	GAVI
A	Country co-finance	V	12.94 %		
B	Number of children to be vaccinated with the second dose	Table 4	120,285	15,560	104,725
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	359,089	46,449	312,640
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	377,043	48,772	328,271
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	94,261	12,193	82,068
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	471,350	60,971	410,379
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	498,686	0	498,686
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,185	0	5,185
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	698,070	90,297	607,773
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	22,342	0	22,342
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	29	0	29
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	30,716	3,974	26,742
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	751,157	97,164	653,993
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	94,270		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %		

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 5)

	Formula	2019		
		Total	Government	GAVI
A	Country co-finance	V	12.94 %	
B	Number of children to be vaccinated with the second dose	Table 4	123,894	16,026
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B \times C$	369,864	47,843
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	388,357	50,235
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	97,090	12,559
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$		
H 2	Reported stock on January 1st	Table 7.11.1		
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	485,450	62,795
J	Number of doses per vial	Vaccine Parameter	1	
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	513,650	0
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,340	0
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	718,952	92,999
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,012	0
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	31,634	4,092
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	773,628	100,071
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	97,090	
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.94 %	

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 6)

		Formula	2020		
			Total	Government	GAVI
A	Country co-finance	V	12.97 %		
B	Number of children to be vaccinated with the second dose	Table 4	127,611	16,552	111,059
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	380,960	49,412	331,548
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	400,008	51,883	348,125
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	100,002	12,971	87,031
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	500,050	64,858	435,192
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	529,059	0	529,059
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,501	0	5,501
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	738,574	95,795	642,779
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,702	0	23,702
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	30	0	30
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,498	4,216	28,282
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	794,804	103,089	691,715
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,010		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %		

Table 7.11.4: Calculation of requirements for **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID** (part 7)

		Formula	2021		
			Total	Government	GAVI
A	Country co-finance	V	12.97 %		
B	Number of children to be vaccinated with the second dose	Table 4	128,035	16,607	111,428
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	382,225	49,576	332,649
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	401,336	52,055	349,281
G	Vaccines buffer stock	Buffer on doses needed + buffer on doses wasted Buffer on doses needed = $(D - D \text{ of previous year original approved}) \times 0.25$ Buffer on doses wasted = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	100,335	13,014	87,321
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H 2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	501,700	65,072	436,628
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	530,816	0	530,816
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,519	0	5,519
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	741,011	96,112	644,899
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	23,781	0	23,781
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	31	0	31
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	32,605	4,229	28,376
S	Freight cost for devices needed	$(O+P+Q) \times \text{freight cost as \% of devices value (fd)}$	0	0	0
T	Total fund needed	$(N+O+P+Q+R+S)$	797,428	103,429	693,999
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	100,340		
V	Country co-financing % of GAVI supported proportion	$U / (N + R)$	12.97 %		

8. Health Systems Strengthening Support (HSS)

Instructions for reporting on HSS funds received

1. Please complete this section only if your country **was approved for and received HSS funds before or during January to December 2014**. All countries are expected to report on:
 - a. Progress achieved in 2014
 - b. HSS implementation during January – April 2015 (interim reporting)
 - c. Plans for 2016
 - d. Proposed changes to approved activities and budget (see No. 4 below)

For countries that received HSS funds within the last 3 months of 2014, or experienced other delays that limited implementation in 2014, this section can be used as an inception report to comment on start up activities.

2. In order to better align HSS support reporting to country processes, for countries of which the 2014 fiscal year starts in January 2014 and ends in December 2014, HSS reports should be received by the GAVI Alliance before **15th May 2015**. For other countries, HSS reports should be received by the GAVI Alliance approximately six months after the end of country fiscal year, e.g., if the country fiscal year ends in March 2015, the HSS reports are expected by GAVI Alliance by September 2015.

3. Please use your approved proposal as reference to fill in this Annual Progress Report. Please fill in this reporting template thoroughly and accurately and use additional space as necessary.

4. If you are proposing changes to approved objectives, activities and budget (reprogramming) please request the reprogramming guidelines by contacting your Country Responsible Officer at GAVI or by emailing gavihss@gavi.org.

5. If you are requesting a new tranche of funding, please make this clear in [Section 8.1.2](#).

6. Please ensure that, **prior to its submission to the GAVI Alliance Secretariat, this report has been endorsed by the relevant country coordination mechanisms** (HSCC or equivalent) [as provided for on the signature page](#) in terms of its accuracy and validity of facts, figures and sources used.

7. Please attach all required [supporting documents](#). These include:

- a. Minutes of all the HSCC meetings held in 2014
- b. Minutes of the HSCC meeting in 2015 that endorses the submission of this report
- c. Latest Health Sector Review Report
- d. Financial statement for the use of HSS funds in the 2014 calendar year
- e. External audit report for HSS funds during the most recent fiscal year (if available)

8. The GAVI Alliance Independent Review Committee (IRC) reviews all Annual Progress Reports. In addition to the information listed above, the IRC requires the following information to be included in this section in order to approve further tranches of HSS funding:

- a. Reporting on agreed indicators, as outlined in the approved M&E framework, proposal and approval letter;
- b. Demonstration of (with tangible evidence) strong links between activities, output, outcome and impact indicators;
- c. Outline of technical support that may be required to either support the implementation or monitoring of the GAVI HSS investment in the coming year

8. Inaccurate, incomplete or unsubstantiated reporting may lead the IRC to either send the APR back to your country for clarifications (which may cause delays in the release of further HSS funds), to recommend against the release of further HSS funds or only approve part of the next tranche of HSS funds.

8.1. Report on the use of HSS funds in 2014 and request of a new tranche

For countries that have previously received the final disbursement of all GAVI approved funds for the HSS grant and have no further funds to request: Is the implementation of the HSS grant completed ? **No**

If NO, please indicate the anticipated date for completion of the HSS grant.

No, because the latest release of HSS grant funds was in Dec. 2014, and activities of implementation are expected to be completed by Dec. 2015.

Please attach any studies or assessments related to or funded by the GAVI HSS grant.

Please attach data disaggregated by sex, rural/urban, district/state where available, particularly for immunisation coverage indicators. This is especially important if GAVI HSS grants are used to target specific populations and/or geographic areas in the country.

If CSOs were involved in the implementation of the HSS grant, please attach a list of the CSOs engaged in grant implementation, the funding received by CSOs from the GAVI HSS grant, and the activities that they have been involved in. If CSO involvement was included in the original proposal approved by GAVI but no funds were provided to CSOs, please explain why not.

No studies or assessments have been done yet, but an end project evaluation is going to be done up to July 2015.

CSOs that included the National Union of Eritrean Youth and Students and National Women's Association were involved in reviewing the application but no fund was allocated for their implementation from the start.

Please see <http://www.gavialliance.org/support/cso/> for GAVI's CSO Implementation Framework

Please provide data sources for all data used in this report.

Please attach the latest reported National Results/M&E Framework for the health sector (with actual reported figures for the most recent year available in country).

8.1.1. Report on the use of HSS funds in **2014**

Please complete [Table 8.1.3.a](#) and [8.1.3.b](#) (as per APR) for each year of your country's approved multi-year HSS programme and both in US\$ and local currency

Please note: If you are requesting a new tranche of funding, please make sure you fill in the last row of [Table 8.1.3.a](#) and [8.1.3.b](#).

8.1.2. Please indicate if you are requesting a new tranche of funding **Yes**

If yes, please indicate the amount of funding requested: **15** US\$

These funds should be sufficient to carry out HSS grant implementation through December 2016.

[Table 8.1.3a \(US\)\\$](#)

	2009	2010	2011	2012	2013	2014
Original annual budgets (as per the originally approved HSS proposal)	0	664000	684000	704500	725500	0
Revised annual budgets (if revised by previous Annual Progress Reviews)	0	0	0	0	0	0
Total funds received from GAVI during the calendar year (A)	0	664000	694250	704500	0	715250
Remaining funds (carry over) from previous year (B)	0	0	438514	658572	793027	357367
Total Funds available during the calendar year (C=A+B)	0	664000	1132764	1363072	793027	1072617
Total expenditure during the calendar year (D)	0	225486	474192	570045	435660	647962
Balance carried forward to next calendar year (E=C-D)	0	438514	658572	793027	357367	424655
Amount of funding requested for future calendar year(s) [please ensure you complete this row if you are requesting a new tranche]	0	0	0	0	0	0

	2015	2016	2017	2018
Original annual budgets (as per the originally approved HSS proposal)	0	0	0	0
Revised annual budgets (if revised by previous Annual Progress Reviews)	0	0	0	0
Total funds received from GAVI during the calendar year (A)	0	0	0	0
Remaining funds (carry over) from previous year (B)	0	0	0	0
Total Funds available during the calendar year (C=A+B)	0	0	0	0
Total expenditure during the calendar year (D)	0	0	0	0
Balance carried forward to next calendar year (E=C-D)	0	0	0	0
Amount of funding requested for future calendar year(s) [please ensure you complete this row if you are requesting a new tranche]	0	0	0	0

Table 8.1.3b (Local currency)

	2009	2010	2011	2012	2013	2014
Original annual budgets (as per the originally approved HSS proposal)	0	9960000	10260000	10567500	10882500	0
Revised annual budgets (if revised by previous Annual Progress Reviews)	0	0	0	0	0	0
Total funds received from GAVI during the calendar year (A)	0	9960000	10413750	10567500	0	10728750
Remaining funds (carry over) from previous year (B)	0	0	6577710	9878580	11895405	5360505
Total Funds available during the calendar year (C=A+B)	0	9960000	16991460	20446080	11895405	16089255
Total expenditure during the calendar year (D)	0	3382290	7112880	8550675	6534900	9719430
Balance carried forward to next calendar year (E=C-D)	0	6577710	9898580	11895405	5360505	6369825
Amount of funding requested for future calendar year(s) [please ensure you complete this row if you are requesting a new tranche]	0	0	0	0	0	0

	2015	2016	2017	2018
Original annual budgets (as per the originally approved HSS proposal)	0	0	0	0
Revised annual budgets (if revised by previous Annual Progress Reviews)	0	0	0	0
Total funds received from GAVI during the calendar year (A)	0	0	0	0
Remaining funds (carry over) from previous year (B)	0	0	0	0
Total Funds available during the calendar year (C=A+B)	0	0	0	0
Total expenditure during the calendar year (D)	0	0	0	0
Balance carried forward to next calendar year (E=C-D)	0	0	0	0
Amount of funding requested for future calendar year(s) [please ensure you complete this row if you are requesting a new tranche]	0	0	0	0

Report of Exchange Rate Fluctuation

Please indicate in the table [Table 8.3.c](#) below the exchange rate used for each calendar year at opening and closing.

[Table 8.1.3.c](#)

Exchange Rate	2009	2010	2011	2012	2013	2014
Opening on 1 January	15	15	15	15	15	15
Closing on 31 December	15	15	15	15	15	15

Detailed expenditure of HSS funds during the 2014 calendar year

Please attach a detailed financial statement for the use of HSS funds during the 2014 calendar year (*Terms of reference for this financial statement are attached in the online APR Annexes*). Financial statements should be signed by the Chief Accountant or by the Permanent Secretary of Ministry of Health. **(Document Number: 19)**

If any expenditures for the January April 2015 period are reported in Tables 8.1.3a and 8.1.3b, a separate, detailed financial statement for the use of these HSS funds must also be attached **(Document Number: 20)**

Has an external audit been conducted? No

External audit reports for HSS programmes are due to the GAVI Secretariat six months following the close of your governments fiscal year. If an external audit report is available during your governments most recent fiscal year, this must also be attached (Document Number: 21)

8.2. Progress on HSS activities in the 2014 fiscal year

Please report on major activities conducted to strengthen immunisation using HSS funds in Table 8.2. It is very important to be precise about the extent of progress and use the M&E framework in your original application and approval letter.

Please provide the following information for each planned activity:

- The percentage of activity completed where applicable
- An explanation about progress achieved and constraints, if any
- The source of information/data if relevant.

Table 8.2: HSS activities in the 2014 reporting year

Major Activities (insert as many rows as necessary)	Planned Activity for 2014	Percentage of Activity completed (annual) (where applicable)	Source of information/data (if relevant)
1.1 Finalize formulation of the National Health Policy Document		100	The finalization of the document has been 100% completed in 2010 (Policy & Planning Division, PPD)
1.2 Disseminate the National Health Policy Document at all levels including the diplomatic corps		100	Activity completed in 2011 , (PPD)
1.3 Finalize formulation of the National Health Sector Development Plan		100	Development of this NHSDP document has been completed in 2012 (PPD)
1.4 Disseminate the National Health Sector Development Plan at all levels including the diplomatic corps		100	This was also competed in 2012 (PPD)
2.1 Strengthen existing central and zonal training institutions to produce middle level health professionals	Strengthen existing central and zonal training institutions to produce middle level health professionals	85	This activity is expected to be 100% complete by the end of May . 2015 , (HRD)
2.2 Upgrade the technical capacity of training school tutors / instructors by training them in areas of identified skill deficits through: distance education post graduate and other relevant courses	Upgrade the technical capacity of training school tutors / instructors by training them in areas of identified skill deficits through: distance education post graduate and other relevant courses	80	Training on identified skill deficits for MoH staff is an ongoing activity. GAVI HSS funds are also used in complementarity to other funds and this activity will therefore be 100% complete by Dec. 2015 (HRD)
2.3 Support central and zonal training institutions with requisite teaching materials that includes audio visual materials books computers etc	Support central and zonal training institutions with requisite teaching materials that includes audio visual materials books computers etc	90	An ongoing activity, completion expected by end of May. 2015 (HRD)
2.4 Review the current staffing pattern in order to establish the MOH Recommended Minimum Staffing Norm for health facilities at all levels	Review the current staffing pattern in order to establish the MOH Recommended Minimum Staffing Norm for health facilities at all levels	90	There was no planned activity for 2014 and therefore its final completion remains at 90% (HRD)
2.5 Update the existing job descriptions of health workers at all levels of the health system.		100	Completed in 2010 (HRD)
2.6 Disseminate the existing job descriptions of health workers to all levels of the health system		100	Activity completed at the end of 2013 (HRD)
2.7 Develop health workers transfer policy		75	This activity remains at 75% completion. Its final accomplishments been dependent on other national policies (HRD)

2.8 Develop health workers transfer policy implementation guidelines		25	This activity remains at 25% completion. Its final accomplishments been dependent on other national policies (HRD)
2.9 Provide recreational amenities for health workers working in 10 selected remote health facilities	Provide recreational amenities for health workers working in 10 selected remote health facilities	100	Activity successfully carried out
2.10 Introduce reward package system to best performing individual health workers and teams at national and Zonal levels	Introduce reward package system to best performing individual health workers and teams at national and Zonal levels	50	Implementation of this activity is on progress and completion is expected to be realized by Dec. 2015. (HRD)
3.1 Scaling health management committees in 3 zobas (regions) and 29 sub-zobas (districts)		100	
3.2 Train health management committees in 3 zobas (regions) and 29 sub-zobas (districts) on their roles and responsibilities		100	
3.3 Establish village health committees at 350 kebabis		100	
3.4 Train village health committees in 350 kebabis on their roles and Responsibilities		100	This activity has been completed in 2013 (Health Facility Management Division, HFMD)
3.5 Provide one week training to 120 health management team members in 3 zobas on research district health systems management data management and community entry and participation	Provide one week training to 120 health management team members in 3 zobas on research district health systems management data management and community entry and participation	100	
4.1 Provide one week training to senior and middle level health managers in RBM skills- Strategic Planning and Management M &E skills and report writing skills	Provide one week training to senior and middle level health managers in RBM skills- Strategic Planning and Management M &E skills and report writing skills	90	An ongoing activity, completion expected by end of May . 2015 (PPD)
4.2 Provide one week training to senior and middle level health managers in RBM skills-2: HMIS data management HMIS data transformation into information operational health system research and making evidence based decisions for health action	Provide one week training to senior and middle level health managers in RBM skills-2: HMIS data management HMIS data transformation into information operational health system research and making evidence based decisions for health action	90	An ongoing activity, completion expected by end of May . 2015 (PPD)
4.3 Support the identification of core minimum national indicators by sponsoring a participatory consensus building workshop		100	Activity already completed in end of 2013 (HIS)
4.4 Support the production of quarterly HMIS bulletin		100	Used for HMIS data collection guideline development (HIS)

4.5 Support the dissemination of quarterly HMIS bulletin		100	The same HMIS data collection guideline disseminated to all facilities (HIS)
4.6 Procure ICT equipment for computerisation of HMIS system in 29 selected sub-zobas [Computer systems Printers Broad Band Internet services]	Procure ICT equipment for computerization of HMIS system in 29 selected sub-zobas [Computer systems Printers Broad Band Internet services]	100	ICT equipment procured and already distributed to selected facilities (HIS)
4.7 Train Health Workers in ICT and Computerised data management skills relevant for operating computerised HMIS	Train Health Workers in ICT and Computerized data management skills relevant for operating computerized HMIS	100	Training to health workers conducted already (HIS)
4.8 Scale up district health systems assessment from the already piloted two zobas to cover the remaining four zobas		100	
5.1 Provide water supply in selected health facilities		50	The fund that was meant for this activity was combined with activity 5.2 in order to procure solar gadgets (reprogramming was approved)
5.2 Supply photo voltaic solar power and cold chain system to selected health facilities		100	This was completed fully in 2014
5.3 Conduct training for cold chain technicians in six zobas		100	
5.4 Construct incinerators in 10 health facilities		100	
5.5 Construct placenta pits in 10 health facilities		100	
5.6 Upgrade 3 health centres to the level of community hospitals (district hospitals)		100	
5.7 Construct accommodation for health workers in selected 3 remote health Facilities		100	
6.1 Train communities (VHTs HFMCs & Teachers) in early detection and response to outbreak of vaccine preventable diseases		100	The funds have been used to carry out community health education and promotion in four of the six zones in the country.
6.2 Carry out household based water quality control in all the six Zobas during both rainy and dry seasons		0	Funds for this activity have been combined with activity 6.3 as per the approved reprogramming.
6.3 Supply chemicals and reagents (e.g. PUR Water guard etc) for water quality control in all the six zobas		100	Activity successfully carried out
6.4 Conduct integrated outreach services		100	An ongoing activity, completion expected by end of May. 2015 (EPI)
6.5 Develop the Referral and Emergency Policy and Implementation Framework		100	

6.6 Improve referral system through training in triage and emergency management including referral of patients /clients (using the Emergency & Referral manual)			75	The 25% remaining fund has been combined to successfully accomplish activity 6.7
6.7 Procure standard equipment and supplies for referral & emergency service provision at selected health facilities	Procure standard equipment and supplies for referral & emergency service provision at selected health facilities		100	Activity successfully carried out
6.8 Carry out regular integrated supportive supervisions	Carry out regular integrated supportive supervisions		100	An ongoing activity, completion expected by end of May. 2015 (IDSR)
6.9 Train health workers in early detection and response to outbreak of vaccine preventable diseases			100	An ongoing activity, completion expected by end of May. 2015 (IDSR)
Management costs			100	Activity successfully carried out
Monitoring and evaluation	Activity for M & E and technical support combined together to conduct GAVI/HSS final term evaluation		50	Activity committed to be used for GAVI/HSS final term evaluation and completion is expected by the end of July.2015
Technical support	Activity for M & E and technical support combined together to conduct GAVI/HSS final term evaluation		50	Activity committed to be used for GAVI/HSS final term evaluation and completion is expected by the end of July.2015

8.2.1 For each objective and activity (i.e. Objective 1, Activity 1.1, Activity 1.2, etc.), explain the progress achieved and relevant constraints (e.g. evaluations, HSCC meetings).

Major Activities (insert as many rows as necessary)	Explain progress achieved and relevant constraints
-----------------------------------------------------	----------------------------------------------------

8.2.2 Explain why any activities have not been implemented, or have been modified, with references.

Explanations have been given with regards to implementation status on the last column of each activity on the above table.

8.2.3 If GAVI HSS grant has been utilised to provide national health human resources incentives, how has the GAVI HSS grant been contributing to the implementation of national Human Resource policy or guidelines?

This activity with regards to provision of incentives to our human resources will be made effective between now and December 2015.

8.3. General overview of targets achieved

Please complete **Table 8.3** for each indicator and objective outlined in the original approved proposal and decision letter. Please use the baseline values and targets for 2013 from your original HSS proposal.

Table 8.3: Progress on targets achieved

Name of Objective or Indicator (Insert as many rows as necessary)	Baseline		Agreed target till end of support in original HSS application	2014 Target	2010	2011	2012	2013	2014	Data Source	Explanation if any targets were not achieved
	Baseline value	Baseline source/date									
Under five mortality rate (per 1000)	93	2006	70/1000	63/1000					63	2010 EPHS	
Number / % of Zobas achieving ≥80% DTP3 coverage	33	2006	100%						52	EPI Coverage survey	

National DTP3 coverage	82	2006/WHOUN ICEF	85%						95%	EPI Coverage survey	
# of HWs distributed according to plan	0	2008/HRD division	100% (4460)	100% (4460)					100% (4460)	HRD	
# of HMT members trained	25	2008/HF mgt division	100% (120)	100% (120)					100% (120)	HFMD	
# of HMIS bulletin available in health facilities	0	2008/HIMS	100% (300)	100% (300)					100% (300)	HIS	
# training sessions conducted in RBM skill 1&2	0	2008/HF mgt division	100% (4)	100% (4)					100% (4)	HFMD	
# of HFs provided with water supply and solar system	0	2008/HF mgt division	100% (4)	50%					50%	HFMD	Remaining 50% of budget used to procure solar gadgets
Referral and emergency service policy document developed	0	2008/HF mgt division	100% (1)	100% (1)					100% (1)	HFMD	
# of HWs trained in triage and emergency management	0	2008/HF mgt division	100% (120)	100% (120)					100% (120)	HFMD	
# of integrated outreach services conducted	0	2008/EPI	100% (8)	100% (8)					100% (8)	EPI	

8.4. Programme implementation in 2014

8.4.1. Please provide a narrative on major accomplishments in 2014, especially impacts on health service programmes, and how the HSS funds benefited the immunisation programme

One of the major accomplishments over the past six months is the provision of emergency medical equipment to selected hospitals that provide mother and child health services. The provision of solar gadgets including batteries and spare parts for pre-existing solar equipment have enabled the facilities to adequately help our cold chains system keep up and running. At the same time provision of light creates conducive work environment for our health workers which in turn helps for their retention.

8.4.2. Please describe problems encountered and solutions found or proposed to improve future performance of HSS funds.

There was no major problem this year, except the delay of fund release which was effected in as late as Dec. 2014.

8.4.3. Please describe the exact arrangements at different levels for monitoring and evaluating GAVI funded HSS activities.

The exact arrangements at different levels for monitoring and evaluating GAVI funded HSS activities remains the same as of last year. The GAVI HSS coordination office have been active in following implementation of activities, compiling progress reports and conducting stakeholders meetings which in effect is a continuous monitoring and periodic evaluation of the project. Besides the PMU/MoH takes care of financial management and communications responsibilities with GAVI HQs.

8.4.4. Please outline to what extent the M&E is integrated with country systems (such as, for example, annual sector reviews). Please describe ways in which reporting on GAVI HSS funds can be more organization with existing reporting systems in your country. This could include using the relevant indicators agreed in the sector-wide approach in place of GAVI indicators.

The release of funds on time by GAVI HQs remains a challenge that has to be improved in future. Other than that the indicators selected and other monitoring mechanisms in place have no problems and are compatible with our country's overall sector control modalities. GAVI funded HSS activities remains the same as of last year. The GAVI HSS coordination office have been active in following implementation of activities, compiling progress reports and conducting stakeholders meetings which in effect is a continuous monitoring and periodic evaluation of the project. Besides the PMU/MoH takes care of financial management and communications responsibilities with GAVI HQs.

8.4.5. Please specify the participation of key stakeholders in the implementation of the HSS proposal (including the EPI Programme and Civil Society Organisations). This should include organisation type, name and implementation function.

The lead stakeholder in this project is the MoH. However other government institutions like the Ministry of Finance and the Ministry of Local Government are our partners on the government side and the WHO & UNICEF on the UN side. Control modalities. GAVI funded HSS activities remains the same as of last year. The GAVI HSS coordination office have been active in following implementation of activities, compiling progress reports and conducting stakeholders meetings which in effect is a continuous monitoring and periodic evaluation of the project. Besides the PMU/MoH takes care of financial management and communications responsibilities with GAVI HQs.

8.4.6. Please describe the participation of Civil Society Organisations in the implementation of the HSS proposal. Please provide names of organisations, type of activities and funding provided to these organisations from the HSS funding.

Civil society organizations like the women and youth & students associations have participated in the final review and consensus building workshop when the document was initially developed. A part from that however, these civil society organizations are not beneficiaries of GAVI/HSS funds and therefore not involved in implementation.

8.4.7. Please describe the management of HSS funds and include the following:

- Whether the management of HSS funds has been effective
- Constraints to internal fund disbursement, if any
- Actions taken to address any issues and to improve management
- Any changes to management processes in the coming year

There was no problem of management of HSS funds nor was any problem encountered to internal auditing systems. This is the end year for this round of GAVI/HSS funds. Future changes to management could be suggested as appropriate in the coming development of a new proposal.

8.5. Planned HSS activities for 2015

Please use **Table 8.5** to provide information on progress on activities in 2015. If you are proposing changes to your activities and budget in 2015 please explain these changes in the table below and provide explanations for these changes.

Table 8.5: Planned activities for 2015

Major Activities (insert as many rows as necessary)	Planned Activity for 2015	Original budget for 2015 (as approved in the HSS proposal or as adjusted during past annual progress reviews)	2015 actual expenditure (as at April 2015)	Revised activity (if relevant)	Explanation for proposed changes to activities or budget (if relevant)	Revised budget for 2015 (if relevant)
		0	0			0

8.6. Planned HSS activities for 2016

Please use **Table 8.6** to outline planned activities for 2016. If you are proposing changes to your activities and budget please explain these changes in the table below and provide explanations for each change so that the IRC can recommend for approval the revised budget and activities.

Please note that if the change in budget is greater than 15% of the approved allocation for the specific activity in that financial year, these proposed changes must be submitted for IRC approval with the evidence for requested changes

Table 8.6: Planned HSS Activities for 2016

Major Activities (insert as many rows as necessary)	Planned Activity for 2016	Original budget for 2016 (as approved in the HSS proposal or as adjusted during past annual progress reviews)	Revised activity (if relevant)	Explanation for proposed changes to activities or budget (if relevant)	Revised budget for 2016 (if relevant)
		0			

8.7. Revised indicators in case of reprogramming

Countries planning to submit reprogramming requests may do so any time of the year. Please request the reprogramming guidelines by contacting your Country Responsible Officer at GAVI or by emailing gavihss@gavi.org

8.8. Other sources of funding for HSS

If other donors are contributing to the achievement of the country's objectives as outlined in the GAVI HSS proposal, please outline the amount and links to inputs being reported on:

Table 8.8: Sources of HSS funds in your country

Donor	Amount in US\$	Duration of support	Type of activities funded
Even though health systems strengthening efforts are been supported by other sources like the Global Fund and UN partners, there is no specific partner support to meet objectives as outlined in the GAVI HSS proposal.			

8.8.1. Is GAVI's HSS support reported on the national health sector budget? **Yes**

8.9. Reporting on the HSS grant

8.9.1. Please list the **main** sources of information used in this HSS report and outline the following:

- How information was validated at country level prior to its submission to the GAVI Alliance.
- Any important issues raised in terms of accuracy or validity of information (especially financial information and the values of indicators) and how these were dealt with or resolved.

Table 8.9.1: Data sources

Data sources used in this report	How information was validated	Problems experienced, if any
PMU/MoH, HIS, PPD, HFMD, HRD data were used to compile this report.	Each implementing partner in this project was requested to submit his/her activity report. This was compared and checked against the financial expenditure in the PMU office which was helpful to validate accuracy and consistency of all reports collected	<ul style="list-style-type: none"> • Delay of submission of reports from implementing agencies, • Delayed disbursement of funds from GAVI, • In adequate allocated budget All three problems were reported in last year's APR and they continue to persist to date.

8.9.2. Please describe any difficulties experienced in putting this report together that you would like the GAVI Alliance and IRC to be aware of. This information will be used to improve the reporting process.

8.9.3. How many times did the Health Sector Coordinating Committee (HSCC) meet in 2014?

Please attach:

1. The minutes from the HSCC meetings in 2015 endorsing this report (**Document Number: 6**)
2. The latest Health Sector Review report (**Document Number: 22**)

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

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

Eritrea **has NOT received GAVI TYPE A CSO support**

Eritrea is not reporting on GAVI TYPE A CSO support for 2014

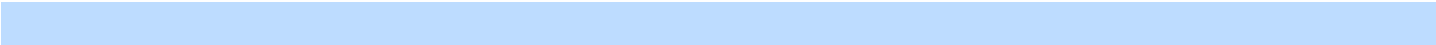
9.2. TYPE B: Support for CSOs to help implement the GAVI HSS proposal or cMYP

Eritrea **has NOT received GAVI TYPE B CSO support**

Eritrea is not reporting on GAVI TYPE B CSO support for 2014

10. 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



11. Annexes

11.1. 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 2014 calendar year, or had balances of funding remaining from previously disbursed ISS/new vaccine introduction grants in 2014, are required to submit financial statements for these 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 2014 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 2013 calendar year (opening balance as of 1 January 2014)
 - b. Income received from GAVI during 2014
 - c. Other income received during 2014 (interest, fees, etc)
 - d. Total expenditure during the calendar year
 - e. Closing balance as of 31 December 2014
 - f. A detailed analysis of expenditures during 2014, 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 2014 (referred to as the "variance").
- IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular rate of exchange has been applied, and any supplementary notes that may help the GAVI Alliance in its review of the financial statements.
- V. Financial statements need not 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 2014 financial year. Audits for ISS are due to the GAVI Secretariat 6 months following the close of each country's financial year.

11.2. Annex 2 – Example income & expenditure ISS

MINIMUM REQUIREMENTS FOR ISS 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 2013 (balance as of 31Decembre 2013)	25,392,830	53,000
Summary of income received during 2014		
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 2014	30,592,132	63,852
Balance as of 31 December 2014 (balance carried forward to 2015)	60,139,325	125,523

* Indicate the exchange rate at opening 01.01.2014, the exchange rate at closing 31.12.2014, 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						
Wedges & 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 2014	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811

** 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.

11.3. 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 2014 calendar year, or had balances of funding remaining from previously disbursed HSS grants in 2014, 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 2014 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 2013 calendar year (opening balance as of 1 January 2014)

b. Income received from GAVI during 2014

c. Other income received during 2014 (interest, fees, etc)

d. Total expenditure during the calendar year

e. Closing balance as of 31 December 2014

f. A detailed analysis of expenditures during 2014, 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 2014 (referred to as the "variance").

IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular rate of exchange has been applied, and any supplementary notes that may help the GAVI Alliance in its review of the financial statements.

V. Financial statements need not 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 2014 financial year. Audits for HSS are due to the GAVI Secretariat 6 months following the close of each country's financial year.

11.4. 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 2013 (balance as of 31Decembre 2013)	25,392,830	53,000
Summary of income received during 2014		
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 2014	30,592,132	63,852
Balance as of 31 December 2014 (balance carried forward to 2015)	60,139,325	125,523

* Indicate the exchange rate at opening 01.01.2014, the exchange rate at closing 31.12.2014, 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						
Wedges & 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 2014	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811

** 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.

11.5. 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 2014 calendar year, or had balances of funding remaining from previously disbursed CSO 'Type B' grants in 2014, are required to submit financial statements for these 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 2014 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 2013 calendar year (opening balance as of 1 January 2014)
 - b. Income received from GAVI during 2014
 - c. Other income received during 2014 (interest, fees, etc)
 - d. Total expenditure during the calendar year
 - e. Closing balance as of 31 December 2014
 - f. A detailed analysis of expenditures during 2014, 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 2014 (referred to as the "variance").
- IV. Financial statements should be compiled in local currency, with an indication of the USD exchange rate applied. Countries should provide additional explanation of how and why a particular rate of exchange has been applied, and any supplementary notes that may help the GAVI Alliance in its review of the financial statements.
- V. Financial statements need not 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 2014 financial year. Audits for CSO 'Type B' are due to the GAVI Secretariat 6 months following the close of each country's financial year.

11.6. 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 2013 (balance as of 31Decembre 2013)	25,392,830	53,000
Summary of income received during 2014		
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 2014	30,592,132	63,852
Balance as of 31 December 2014 (balance carried forward to 2015)	60,139,325	125,523

* Indicate the exchange rate at opening 01.01.2014, the exchange rate at closing 31.12.2014, 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						
Wedges & 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 2014	42,000,000	87,663	30,592,132	63,852	11,407,868	23,811

** 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. Attachments

Document Number	Document	Section	Mandatory	File
1	Signature of Minister of Health (or delegated authority)	2.1	✓	Ministers Signature.pdf File desc: Date/time : 14/05/2015 04:06:56 Size: 275 KB
2	Signature of Minister of Finance (or delegated authority)	2.1	✓	Ministers Signature.pdf File desc: Date/time : 14/05/2015 04:08:26 Size: 275 KB
3	Signatures of members of ICC	2.2	✓	ICC Signature.pdf File desc: Date/time : 14/05/2015 04:12:04 Size: 212 KB
4	Minutes of ICC meeting in 2015 endorsing the APR 2014	5.4	✓	ICC meeting endorsing APR.doc File desc: Date/time : 15/05/2015 02:56:34 Size: 47 KB
5	Signatures of members of HSCC	2.3	✓	GAVI HSCC Signitures.docx File desc: Date/time : 15/05/2015 10:50:12 Size: 433 KB
6	Minutes of HSCC meeting in 2015 endorsing the APR 2014	8.9.3	✓	GAVI 4.docx File desc: Date/time : 15/05/2015 10:52:13 Size: 248 KB
7	Financial statement for ISS grant (Fiscal year 2014) 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 2014)	6.2.3	✗	No file loaded
9	Post Introduction Evaluation Report	7.2.1	✗	Eritrea PIE - Final Report V2.pdf File desc: Date/time : 14/05/2015 04:17:29 Size: 1 MB
10	Financial statement for NVS introduction grant (Fiscal year 2014) signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	7.3.1	✓	Financial Statement.docx File desc: Date/time : 15/05/2015 10:57:46 Size: 443 KB
11	External audit report for NVS introduction grant (Fiscal year 2014) if total expenditures in 2014 is greater than US\$ 250,000	7.3.1	✓	External Audit for NVS Fiscal Year 2014.doc File desc: Date/time : 14/05/2015 04:51:31 Size: 39 KB

12	Latest EVSM/VMA/EVM report	7.5	✓	ERI EVM Report 2012.pdf File desc: Date/time : 14/05/2015 04:42:38 Size: 2 MB
13	Latest EVSM/VMA/EVM improvement plan	7.5	✓	EVMA Improvement Plan 2013.doc File desc: Date/time : 14/05/2015 04:48:55 Size: 114 KB
14	EVSM/VMA/EVM improvement plan implementation status	7.5	✓	EVMA Implementation Plan Implementation Status 2014.doc File desc: Date/time : 14/05/2015 04:47:01 Size: 88 KB
16	Valid cMYP if requesting extension of support	7.8	✓	ERI cMYP 2012 2016 March 2012 Final.pdf File desc: Date/time : 14/05/2015 04:21:49 Size: 464 KB
17	Valid cMYP costing tool if requesting extension of support	7.8	✓	cMYP_V3.6.8 Costing 2014.xlsx File desc: Date/time : 14/05/2015 04:27:21 Size: 2 MB
18	Minutes of ICC meeting endorsing extension of vaccine support if applicable	7.8	✓	ICC meeting endorsing APR.doc File desc: Date/time : 15/05/2015 02:44:22 Size: 47 KB
19	Financial statement for HSS grant (Fiscal year 2014) signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	8.1.3	✓	GAVI HSS Budget VS Actual 2014.docx File desc: Date/time : 15/05/2015 10:44:39 Size: 995 KB
20	Financial statement for HSS grant for January-April 2015 signed by the Chief Accountant or Permanent Secretary in the Ministry of Health	8.1.3	✓	GAVI HSS Budget VS Actual 2014.docx File desc: Date/time : 15/05/2015 10:48:52 Size: 995 KB
21	External audit report for HSS grant (Fiscal Year 2014)	8.1.3	✓	Audit report will be done June.docx File desc: Date/time : 15/05/2015 11:07:23 Size: 13 KB
22	HSS Health Sector review report	8.9.3	✓	HSS Gap analysis Eritrea-Mission Report 090314.docx File desc: Date/time : 14/05/2015 12:12:55 Size: 56 KB
23	Report for Mapping Exercise CSO Type A	9.1.1	✗	No file loaded
24	Financial statement for CSO Type B grant (Fiscal year 2014)	9.2.4	✗	No file loaded

25	External audit report for CSO Type B (Fiscal Year 2014)	9.2.4	X	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 2014 on (i) 1st January 2014 and (ii) 31st December 2014	0	✓	Banking statement.doc File desc: Date/time : 15/05/2015 08:19:11 Size: 22 KB
27	Minutes ICC meeting endorsing change of vaccine presentation	7.7	X	No file loaded
28	Justification for changes in target population	5.1	X	No file loaded
	Other		X	GAVI 2.docx File desc: Date/time : 15/05/2015 10:53:45 Size: 439 KB
GAVI 3.docx File desc: Date/time : 15/05/2015 10:54:52 Size: 319 KB				
GAVI 4.docx File desc: Date/time : 15/05/2015 10:55:35 Size: 248 KB				
GAVI Income & Expenditure 2015.docx File desc: Date/time : 15/05/2015 10:56:28 Size: 396 KB				
National M & E Results.docx File desc: Date/time : 14/05/2015 12:18:41 Size: 13 KB				