



GAVI Alliance

# Annual Progress Report **2014**

Submitted by

## The Government of *Lao People's Democratic Republic*

Reporting on year: **2014**

Requesting for support year: **2016**

Date of submission: **16/05/2015**

**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](mailto: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	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2015
Routine New Vaccines Support	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	2015
Preventive Campaign Support	JE, 5 dose(s) per vial, LYOPHILISED	Not selected	2015

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

## 1.2. Programme extension

Type of Support	Vaccine	Start year	End year
Routine New Vaccines Support	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	2016	2020
Routine New Vaccines Support	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	2016	2020

## 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
COS	Yes	Not applicable	No
HSFP	Yes	Next tranche of HSFP Grant No	No

VIG: Vaccine Introduction Grant; COS: Campaign Operational Support

## 1.4. Previous Monitoring IRC Report

There is no APR Monitoring IRC Report available for Lao People's Democratic Republic from previous year.

## 2. Signatures

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

By signing this page, the Government of **Lao People's Democratic Republic** 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 **Lao People's Democratic Republic**

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)	
<b>Name</b>	Dr. Inlavanh Keobouphanh, Vice-Minister of Health	<b>Name</b>	Mr. Khamphone Phouthavong, Director of Finance Dept. MOH
<b>Date</b>		<b>Date</b>	
<b>Signature</b>		<b>Signature</b>	

*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
Anonh Xeuatvongsa	Deputy Director of Mother and Child Health center, Manager of National Immunization Program	856-20-23010287	anonhxeuat@gmail.com
Siddhartha Sankar Datta	EPI Technical Officer, WHO country office	856-20-55519276	dattas@wpro.who.int
Ataur Rahman	Immunization Specialist, UNICEF country office	856-20- 54282357	atrahman@unicef.org

### 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
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Dr Phat KEUNGSANETH	Director of Hygiene and Health Promotion Department		
Assoc. Prof. Dr. Khampe Phongsavath	Director of GAVI HSS committee, Lao PDR		
Dr. Seth Chittanavanh	Deputy Director of GAVI HSS Committee, Lao PDR		
Dr. Thanome Insan	Director of the Medical Product and Supply Center		
Dr. Sengthong Vilakoun	Director of Provincial Health Office, Vientiane Capital		
Dr. Khopkeo Souphanthong	Deputy Director of the Mother and Child Health Center		
Dr. Hongwei Gao	Representative of UNICEF to Lao PDR		
Dr. Juliet Fleischl	Representative of WHO to Lao PDR		
Dr. Ataur Rahman	Immunization specialist, UNICEF country office		
Dr. Siddhartha Sankar Datta	EPI Technical officer, WHO country office		
Dr. Kaisone Chounlamany	Deputy Director of Hygiene and Health Promotion Department, MOH		
Dr. Ruhul Amin	HPMC, Lux-Dev		
Dr. Viengphone Khanthamaly	USCDC		

Dr. Phasouk Vognvichith	Deputy Director of the Planning and International Cooperation Department		
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ICC may wish to send informal comments to: [apr@gavi.org](mailto: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), **Not applicable**, 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
Not applicable	Not applicable		

HSCC may wish to send informal comments to: [apr@gavi.org](mailto: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)

Lao People's Democratic Republic 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	191,043	188,150	195,248	195,248		195,248		195,248		195,248
Total infants' deaths	10,302	10,134	10,524	10,524		10,524		10,524		10,524
Total surviving infants	180741	178,016	184,724	184,724		184,724		184,724		184,724
Total pregnant women	191,043	188,150	195,248	195,248		195,248		195,248		195,248
Number of infants vaccinated (to be vaccinated) with BCG	166,207	154,441	175,723	175,723		175,723		175,723		175,723
BCG coverage[1]	87 %	82 %	90 %	90 %	0 %	90 %	0 %	90 %	0 %	90 %
Number of infants vaccinated (to be vaccinated) with OPV3	157,244	156,754	166,252	166,252		166,252		166,252		166,252
OPV3 coverage[2]	87 %	88 %	90 %	90 %	0 %	90 %	0 %	90 %	0 %	90 %
Number of infants vaccinated (to be vaccinated) with DTP1[3]	162,667	167,508	170,500	170,500		170,500		170,500		170,500
Number of infants vaccinated (to be vaccinated) with DTP3[3][4]	157,244	157,377	166,252	166,252		166,252		166,252		166,252
DTP3 coverage[2]	87 %	88 %	90 %	90 %	0 %	90 %	0 %	90 %	0 %	90 %
Wastage[5] rate in base-year and planned thereafter (%) for DTP	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	1.00	1.05	1.00	1.05	1.00	1.05
Number of infants vaccinated (to be vaccinated) with 1st dose of DTP-HepB-Hib	180,741	167,508	170,500	170,500		170,500		170,500		170,500
Number of infants vaccinated (to be vaccinated) with 3rd dose of DTP-HepB-Hib	174,715	157,377	166,252	166,252		166,252		16,625		166,252
DTP-HepB-Hib coverage[2]	97 %	88 %	90 %	90 %	0 %	90 %	0 %	9 %	0 %	90 %
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)	162,667	140,633	166,252	166,252		166,252		166,252		166,252

Number of infants vaccinated (to be vaccinated) with 3rd dose of Pneumococcal (PCV13)	149,111	128,512	157,266	157,266		157,266		157,266		157,266
Pneumococcal (PCV13) coverage[2]	82 %	72 %	85 %	85 %	0 %	85 %	0 %	85 %	0 %	85 %
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 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 Measles	157,244	154,892	166,252	166,252		166,252		166,252		166,252
Measles coverage[2]	87 %	87 %	90 %	90 %	0 %	90 %	0 %	90 %	0 %	90 %
Pregnant women vaccinated with TT+	152,834	72,355	156,198	156,198		156,198		156,198		156,198
TT+ coverage[7]	80 %	38 %	80 %	80 %	0 %	80 %	0 %	80 %	0 %	80 %
Vit A supplement to mothers within 6 weeks from delivery	0	0	0	0		0		0		0
Vit A supplement to infants after 6 months	758,161	576,434	774,763	774,763	N/A	774,763	N/A	774,763	N/A	774,763
Annual DTP Drop out rate [ ( DTP1 – DTP3 ) / DTP1 ] x 100	3 %	6 %	2 %	2 %	0 %	2 %	0 %	2 %	0 %	2 %

Number	Targets (preferred presentation)			
	2019		2020	
	Previous estimates in 2014	Current estimation	Previous estimates in 2014	Current estimation
Total births		195,248		195,248
Total infants' deaths		10,524		10,524
Total surviving infants		184,724		184,724
Total pregnant women		195,248		195,248
Number of infants vaccinated (to be vaccinated) with BCG		175,723		175,723
BCG coverage[1]	0 %	90 %	0 %	90 %
Number of infants vaccinated (to be vaccinated) with OPV3		166,252		166,252
OPV3 coverage[2]	0 %	90 %	0 %	90 %
Number of infants vaccinated (to be vaccinated) with DTP1 [3]		170,500		170,500
Number of infants vaccinated (to be vaccinated) with DTP3 [3][4]		166,252		166,252
DTP3 coverage[2]	0 %	90 %	0 %	90 %
Wastage[5] rate in base-year and planned thereafter (%) for DTP		5		5
Wastage[5] factor in base-year and planned thereafter for DTP	1.00	1.05	1.00	1.05
Number of infants vaccinated (to be vaccinated) with 1st dose of DTP-HepB-Hib		170,500		170,500

Number of infants vaccinated (to be vaccinated) with 3rd dose of DTP-HepB-Hib		166,252		166,252
DTP-HepB-Hib coverage[2]	0 %	90 %	0 %	90 %
Wastage[5] rate in base-year and planned thereafter (%)		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1	1.05	1	1.05
Maximum wastage rate value for DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Pneumococcal (PCV13)		166,252		166,252
Number of infants vaccinated (to be vaccinated) with 3rd dose of Pneumococcal (PCV13)		157,266		157,266
Pneumococcal (PCV13) coverage[2]	0 %	85 %	0 %	85 %
Wastage[5] rate in base-year and planned thereafter (%)		5		5
Wastage[5] factor in base-year and planned thereafter (%)	1	1.05	1	1.05
Maximum wastage rate value for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	0 %	5 %	0 %	5 %
Number of infants vaccinated (to be vaccinated) with 1st dose of Measles		166,252		166,252
Measles coverage[2]	0 %	90 %	0 %	90 %
Pregnant women vaccinated with TT+		156,198		156,198
TT+ coverage[7]	0 %	80 %	0 %	80 %
Vit A supplement to mothers within 6 weeks from delivery		0		0
Vit A supplement to infants after 6 months	N/A	774,763	N/A	774,763
Annual DTP Drop out rate [ ( DTP1 – DTP3 ) / DTP1 ] x 100	0 %	2 %	0 %	2 %

[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 - 2015 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 major change in the number of estimated birth

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

No major change in the number of estimated 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.**

The estimated target provided for 2016-2020 is based on the projection from 2005 census, however, the recently conducted census will provide a better estimate of the total population including total birth. The actual target population and the number of children vaccinated will be corrected after the census result available and in subsequent GAVI APR. For practical reasons, 2015 figures are retained in this APR. The targets for immunization coverage will be decided in the new cMYP 2016-2020 and respective changes will be made in the subsequent GAVI APR.

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

No change

### 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
Lao Social Indicator Survey	2011-2012	55.4	55.5

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

No discrepancies exist in accessing and utilizing the vaccination services between boys and girls. The sex-disaggregated data is not collected routinely by the program unit at any level

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/>)

In Lao PDR, the utilization of immunization services including the delivery of services by the system is dependent on geo-topography and not dependent on gender related barriers. In

order form others to make a decision for immunization related services, Lao women's union and village leaders are engaged for dissemination of information on the benefit of vaccination. The sex of service provider has very little impact on utilization of vaccination services by the community. The health system in Lao PDR has a mix of male and female health workers according to the location of health center and needs of the community

### 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\$.

<b>Exchange rate used</b>	1 US\$ = 8000	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	KOICA	USCDC	PATH
Traditional Vaccines*	689,530	398,680	0	230,850	0	60,000	0	0
New and underused Vaccines**	6,818,905	241,140	2,515,765	0	0	0	3,937,000	125,000
Injection supplies (both AD syringes and syringes other than ADs)	144,000	54,000	60,000	30,000	0	0	0	0
Cold Chain equipment	107,000	67,000	0	40,000	0	0	0	0
Personnel	1,980,000	1,980,000	0	0	0	0	0	0
Other routine recurrent costs	890,000	625,000	0	265,000	0	0	0	0
Other Capital Costs	140,000	125,000	0	15,000	0	0	0	0
Campaigns costs	2,763,205	100,000	0	1,905,246	572,959	0	185,000	0
Programme support for strengthening routine immunization		250,000	0	0	128,154	0	0	0
<b>Total Expenditures for Immunisation</b>	<b>13,532,640</b>							
<b>Total Government Health</b>		<b>3,840,820</b>	<b>2,575,765</b>	<b>2,486,096</b>	<b>701,113</b>	<b>60,000</b>	<b>4,122,000</b>	<b>125,000</b>

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? **2**

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](#)

Are any Civil Society Organisations members of the ICC? **No**

If **Yes**, which ones?

<b>List CSO member organisations:</b>

## 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. Strengthening routine vaccination with full implementation targeting at micro planning in all health center and districts levels nationwide. Improve the outreach services with scheduled vaccination session in priority hard-to-reach areas and identified ethnic population. Ensuring adherence to new strategic guideline for improving coverage through fixed site promotion and quality integrated outreach services
2. Ensure utilization of PCV and other routine vaccines in remote areas with special focus to identified high risk population.
3. Implementation and close follow up on improvement plan from EVM 2014 (Development of Comprehensive EVM improvement plan 2016-2020) with special focus on training on cold chain and vaccine management for district and health center levels including preventive maintenance for district cold chain officer
4. Establish a routine system of conducting data quality assessment at sub nation level
5. EPI coverage survey in 2015 with technical and financial support from GAVI, WHO and UNICEF
6. IPV vaccine introduction nation-wide (quarter4/2015)
7. JE vaccination campaign (10 southern provinces) and introduction of JE in routine
8. Development of Comprehensive Multi Year plan2016-2020
9. Development of national communication strategy for routine immunization with special focus on high risk ethnic community.
10. Finalize National EPI policy.
11. Training of provincial and district EPI managers on AEFI
12. Develop and print EPI handbook for medical officers and all healthcare workers.

## 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	Gov't , UNICEF
Measles	AD	Gov't , UNICEF
TT	AD	Gov't , UNICEF
DTP-containing vaccine	A	Gov't, GAVI
IPV	AD	Gov't, GAVI
HapB birth dose	AD	Gov't
PCV	AD	Gov't, GAVI
HPV (in the demonstration provinces)	AD	GAVI
JE	AD	GAVI, PATH

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

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

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

No major obstacles were encountered for implementation of the plan

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

Filled safety boxes are being collected from HCs for incineration at the provincial level where a functional incinerator is available. In other instances, the filled safety boxes are burnt and buried.



## **6. Immunisation Services Support (ISS)**

### **6.1. Report on the use of ISS funds in 2014**

Lao People's Democratic Republic is not reporting on Immunisation Services Support (ISS) fund utilisation in 2014

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

Lao People's Democratic Republic is not reporting on Immunisation Services Support (ISS) fund utilisation in 2014

### **6.3. Request for ISS reward**

Request for ISS reward achievement in Lao People's Democratic Republic 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?
Pneumococcal (PCV13)	610,200	621,000	0	No
DTP-HepB-Hib	691,800	691,800	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? ...)

The number of DTP-HepB-Hib doses received in 2014 was less than that in the decision letter, because the national vaccine store had stock in hand on 3 December 2013 which was used in 2014

- 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.**

Every year the plan of vaccine requirement and expected shipment plan are shared with the UNICEF country office for further coordination with supply division

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.

## 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	Yes	01/11/2009
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? **June 2016**

Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID		
Nationwide introduction	Yes	01/06/2014
Phased introduction	Yes	01/10/2013
The time and scale of introduction was as planned in the proposal? If No, Why ?	Yes	

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

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) )

PIE was conducted for introduction of HPV vaccine, final report is attached

### 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? **Yes**

### 7.2.4. Surveillance

Does your country conduct sentinel surveillance for:

a. rotavirus diarrhea? **Yes**

b. pediatric bacterial meningitis or pneumococcal or meningococcal disease? **Yes**

Does your country conduct special studies around:

a. rotavirus diarrhea? **Yes**

b. pediatric bacterial meningitis or pneumococcal or meningococcal disease? **Yes**

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? **Yes**

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

The Rotavirus Surveillance is being conducted in Mahosot Hospital as sentinel site surveillance and WHO provides the required financial and technical support to conduct the surveillance. The rotavirus surveillance has revealed that around 40-60% of the enrolled diarrhoea cases were due to rotavirus infection. Majority of the affected population is less than 2 years of age. The figure 1 indicates the seasonality of the hospitalized rotavirus cases.

Figure 2 and 3 demonstrates the G and P genotypes detected amongst the positive rotavirus cases in Lao PDR in 2013 and 2014.

The Japanese encephalitis surveillance is conducted as sentinel surveillance in Mahosot Hospital with Wellcome Trust with technical assistance from WHO and National Centre of Epidemiology and Laboratory. In all the testing there were positive cases with 2007-2008 study finding 13% of all acute encephalitis syndrome cases positive for Japanese encephalitis. The positive cases came from central, northern and southern Lao PDR. In 2010-2012 there were several outbreaks primarily in northern Lao PDR but there were cases even in Vientiane Capital and some cases in southern Lao PDR.

Figure 4 showed the provincial distribution of the suspected Acute Encephalitis Syndrome cases which tested positive for JE as per the NCLE and Mahosot Surveillance data. This data was used for the decision making process in introduction of the JE vaccine in the campaign in Lao PDR.

### 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)	312,553	2,500,424,000
Remaining funds (carry over) from 2013 (B)	0	0
Total funds available in 2014 (C=A+B)	312,553	2,500,424,000
Total Expenditures in 2014 (D)	312,553	2,500,424,000
Balance carried over to 2015 (E=C-D)	0	0

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 the EPI Manager, or by the Permanent Secretary of Ministry of Health

#### 7.3.2. Programmatic Reporting

Please report on major activities that have been undertaken in relation to the introduction of a new vaccine, using the GAVI New Vaccine Introduction Grant

No major activities were conducted in 2014 with VIGs, however, in 2015 activities are planned for both IPV and JE introduction. Detail report will be provided in next year APR.

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

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

## 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		
Awarded Vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	122,500	32,400
Q.2: Which were the amounts of funding for country co-financing in reporting year 2014 from the following sources?		
Government	100%	
Donor		
Other		
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		
Awarded Vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID		
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		
Awarded Vaccine #2: Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID		
Q.5: Please state any Technical Assistance needs for developing financial sustainability strategies, mobilising funding for immunization, including for co-financing		

\*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](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? **June 2014**

Please attach:

- (a) EVM assessment (**Document No 12**)
- (b) Improvement plan after EVM (**Document No 13**)
- (c) Progress report on the activities implemented during the year and status of implementation of recommendations from the Improvement Plan (**Document No 14**)

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

Are there any changes in the Improvement plan, with reasons? **No**

If yes, provide details

The new improvement plan is being finalized and the progress report on the status of recommendation will be provided on the next APR.

When is the next Effective Vaccine Management (EVM) assessment planned? **May 2019**

## 7.6. Monitoring GAVI Support for Preventive Campaigns in 2014

### 7.6.1. Vaccine Delivery

Did you receive the approved amount of vaccine doses for JE Preventive Campaigns that GAVI communicated to you in its Decision Letter (DL)?

[ A ]	[ B ]	[ C ]
Total doses approved in DL	Campaign start date	Total doses received (Please enter the arrival dates of each shipment and the number of doses of each shipment)
1788500	01/04/2015	1788500 (13/1/2015)

If numbers [A] and [C] above are different, what were the main problems encountered, if any?

If the date(s) indicated in [C] are after [B] the campaign dates, what were the main problems encountered? What actions did you take to ensure the campaign was conducted as planned?

### 7.6.2. Programmatic Results of JE preventive campaigns

Geographical Area covered	Time period of the campaign	Total number of Target population	Achievement, i.e., vaccinated population	Administrative Coverage (%)	Survey Coverage (%)	Wastage rates	Total number of AEFI	Number of AEFI attributed to MenA vaccine

\*If no survey is conducted, please provide estimated coverage by independent monitors

Has the campaign been conducted according to the plans in the approved proposal? **Yes**

If the implementation deviates from the plans described in the approved proposal, please describe the reason.

Has the campaign outcome met the target described in the approved proposal? (did not meet the target/exceed the target/met the target) If you did not meet/exceed the target, what have been the underlying

reasons on this (under/over) achievement?

Campaign is under way in the provinces. A detail report will be sent to GAVI after the completion.

What lessons have you learned from the campaign?

Same as above

### 7.6.3. Fund utilisation of operational cost of JE preventive campaigns

Category	Expenditure in Local currency	Expenditure in USD
<b>Total</b>	<b>0</b>	<b>0</b>

## 7.7. Change of vaccine presentation

Lao People's Democratic Republic 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 2020 for the following vaccines:

- \* **DTP-HepB-Hib, 1 dose(s) per vial, LIQUID**
- \* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

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**

\* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

The multi-year support extension is in line with the new cMYP for the years 2016 to 2020, 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**

\* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

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**

\* **Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

### **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	2012	2013	2014	2015	2016	2017	2018
DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID			3.40 %	3.50 %	3.60 %	4.40 %	4.40 %
JE, 5 dose(s) per vial, LYOPHILISED	JE, 5 dose(s) per vial, LYOPHILISED			37.00 %	7.90 %	7.90 %	5.80 %	4.70 %
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID			4.40 %	4.50 %	3.00 %	4.50 %	4.60 %

Vaccine Antigen	Vaccine Type	2019	2020
DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	DTP-HepB-Hib, 1 dose(s) per vial, LIQUID	4.40 %	4.40 %
JE, 5 dose(s) per vial, LYOPHILISED	JE, 5 dose(s) per vial, LYOPHILISED	4.50 %	4.20 %
Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID	3.10 %	3.10 %

## 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
	<b>Number of surviving infants</b>	Parameter	#	180,741	184,724	184,724	184,724	184,724
	<b>Number of children to be vaccinated with the first dose</b>	Parameter	#	180,741	170,500	170,500	170,500	170,500
	<b>Number of children to be vaccinated with the third dose</b>	Parameter	#	174,715	166,252	166,252	16,625	166,252
	<b>Immunisation coverage with the third dose</b>	Parameter	%	96.67 %	90.00 %	90.00 %	9.00 %	90.00 %
	<b>Number of doses per child</b>	Parameter	#	3	3	3	3	3
	<b>Estimated vaccine wastage factor</b>	Parameter	#	1.05	1.05	1.05	1.05	1.05
	<b>Stock in Central Store Dec 31, 2014</b>		#	579,650				
	<b>Stock across second level Dec 31, 2014 (if available)*</b>		#					
	<b>Stock across third level Dec 31, 2014 (if available)*</b>	Parameter	#					
	<b>Number of doses per vial</b>	Parameter	#		1	1	1	1
	<b>AD syringes required</b>	Parameter	#		Yes	Yes	Yes	Yes
	<b>Reconstitution syringes required</b>	Parameter	#		No	No	No	No

	<b>Safety boxes required</b>	Parameter	#		Yes	Yes	Yes	Yes
cc	<b>Country co-financing per dose</b>	Parameter	\$		0.30	0.00	0.00	0.00
ca	<b>AD syringe price per unit</b>	Parameter	\$		0.0448	0.0448	0.0448	0.0448
cr	<b>Reconstitution syringe price per unit</b>	Parameter	\$		0	0	0	0
cs	<b>Safety box price per unit</b>	Parameter	\$		0.0054	0.0054	0.0054	0.0054
fv	<b>Freight cost as % of vaccines value</b>	Parameter	%		3.50 %	3.60 %	4.40 %	4.40 %

ID		Source		2019	2020	TOTAL
	<b>Number of surviving infants</b>	Parameter	#	184,724	184,724	1,289,085
	<b>Number of children to be vaccinated with the first dose</b>	Parameter	#	170,500	170,500	1,203,741
	<b>Number of children to be vaccinated with the third dose</b>	Parameter	#	166,252	166,252	1,022,600
	<b>Immunisation coverage with the third dose</b>	Parameter	%	90.00 %	90.00 %	
	<b>Number of doses per child</b>	Parameter	#	3	3	
	<b>Estimated vaccine wastage factor</b>	Parameter	#	1.05	1.05	
	<b>Number of doses per vial</b>	Parameter	#	1	1	
	<b>AD syringes required</b>	Parameter	#	Yes	Yes	
	<b>Reconstitution syringes required</b>	Parameter	#	No	No	
	<b>Safety boxes required</b>	Parameter	#	Yes	Yes	
cc	<b>Country co-financing per dose</b>	Parameter	\$	0.00	0.00	
ca	<b>AD syringe price per unit</b>	Parameter	\$	0.0448	0.0448	
cr	<b>Reconstitution syringe price per unit</b>	Parameter	\$	0	0	
cs	<b>Safety box price per unit</b>	Parameter	\$	0.0054	0.0054	
fv	<b>Freight cost as % of vaccines value</b>	Parameter	%	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.

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.

Not defined

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

Co-financing group	Intermediate
--------------------	--------------

	2014	2015	2016	2017	2018
Minimum co-financing	0.26	0.30	0.35	0.40	0.46
Recommended co-financing as per			0.35	0.40	0.46
Your co-financing	0.26	0.30			

	2019	2020
Minimum co-financing	0.53	0.61

Recommended co-financing as per	0.53	0.61
Your co-financing		

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

		2014	2015	2016	2017	2018
Number of vaccine doses	#	606,500	123,000	537,100	425,300	729,900
Number of AD syringes	#	641,000	111,600	563,000	451,600	775,100
Number of re-constitution syringes	#	0	0	0	0	0
Number of safety boxes	#	7,125	1,250	5,925	4,700	8,050
Total value to be co-financed by GAVI	\$	1,280,000	255,000	1,025,500	678,000	1,163,500

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

		2019	2020
Number of vaccine doses	#	729,900	729,900
Number of AD syringes	#	775,100	775,100
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	8,050	8,050
Total value to be co-financed by GAVI	\$	1,163,500	1,160,500

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

		2014	2015	2016	2017	2018
Number of vaccine doses	#	85,300	20,900	0	0	0
Number of AD syringes	#	90,100	19,000	0	0	0
Number of re-constitution syringes	#	0	0	0	0	0
Number of safety boxes	#	1,025	225	0	0	0
Total value to be co-financed by the Country [1]	\$	180,000	43,500	0	0	0

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

		2019	2020
Number of vaccine doses	#	0	0
Number of AD syringes	#	0	0
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	0	0
Total value to be co-financed by the Country [1]	\$	0	0

**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	180,741	170,500		
B1	Number of children to be vaccinated with the third dose	Table 4	174,715	170,500		
C	Number of doses per child	Vaccine parameter (schedule)	3	3		

D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	533,727	505,511		
E	Estimated vaccine wastage factor	Table 4	1.05	1.05		
F	Number of doses needed including wastage	$D \times E$		530,786		
G	Vaccines buffer stock	<p><b>Buffer on doses needed + buffer on doses wasted</b>  <b>Buffer on doses needed</b> = <math>(D - D \text{ of previous year original approved}) \times 0.375</math>  <b>Buffer on doses wasted</b> =</p> <ul style="list-style-type: none"> <li><i>if(wastage factor of previous year current estimation &lt; wastage factor of previous year original approved):</i> <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.375</math></li> <li><i>else:</i> <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375</math>  <math>\geq 0</math></li> </ul>				
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.375)$				
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$				
H2	Reported stock on January 1st	Table 7.11.1	474,166	579,650		
H3	Shipment plan	Approved volume		143,900		
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$		143,900		
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	$U / T$				

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	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	170,500	0	170,500
B1	Number of children to be vaccinated with the third dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	505,511	0	505,511

E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	530,786	0	530,786
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.375$ <b>Buffer on doses wasted</b> = <ul style="list-style-type: none"> <li>if <math>(\text{wastage factor of previous year current estimation} &lt; \text{wastage factor of previous year original approved})</math>: <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.375</math></li> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>	1	0	1
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.375)$	- 6,279	0	- 6,279
H1	Calculated opening stock	$H2 (2015) + H3 (2015) - F (2015)$	192,765	0	192,765
H2	Reported stock on January 1st	Table 7.11.1			
H3	Shipment plan	Approved volume			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	537,100	0	537,100
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	562,971	0	562,971
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	5,909	0	5,909
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	965,169	0	965,169
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	25,222	0	25,222
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	33	0	33
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	34,747	0	34,747
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	$(N+O+P+Q+R+S)$	1,025,171	0	1,025,171
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

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	0.00 %	
B	Number of children to be vaccinated with the first dose	Table 4	170,500	0
B1	Number of children to be vaccinated with the third dose	Table 4	16,625	0
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	294,537	0
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	309,264	0
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.375$	115,974	0

		<b>Buffer on doses wasted =</b>			
		<ul style="list-style-type: none"> <li>if(wastage factor of previous year current estimation &lt; wastage factor of previous year original approved): <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.375</math></li> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>			
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.375)$			
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	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	425,250	0	425,250
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	451,563	0	451,563
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	4,678	0	4,678
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	629,796	0	629,796
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	20,231	0	20,231
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	26	0	26
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	27,712	0	27,712
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	$(N+O+P+Q+R+S)$	677,765	0	677,765
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

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	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	170,500	0	170,500
B1	Number of children to be vaccinated with the third dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	505,511	0	505,511
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	530,786	0	530,786

G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.375$ <b>Buffer on doses wasted</b> = <ul style="list-style-type: none"> <li>if(wastage factor of previous year current estimation &lt; wastage factor of previous year original approved): <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.375</math></li> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>	199,045	0	199,045
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.375)$			
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	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	729,850	0	729,850
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	775,012	0	775,012
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	8,029	0	8,029
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	1,080,908	0	1,080,908
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	34,721	0	34,721
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	44	0	44
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	47,560	0	47,560
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	$(N+O+P+Q+R+S)$	1,163,233	0	1,163,233
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

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	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	170,500	0	170,500
B1	Number of children to be vaccinated with the third dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	505,511	0	505,511
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	530,786	0	530,786
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.375$ <b>Buffer on doses wasted</b> = <ul style="list-style-type: none"> <li>if(wastage factor of previous year current estimation &lt; wastage factor of previous year original approved): <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.375</math></li> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>	199,045	0	199,045

		$\text{previous year current estimation}) \times 0.375$ <ul style="list-style-type: none"> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>			
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.375)$			
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	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	729,850	0	729,850
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	775,012	0	775,012
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	8,029	0	8,029
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	1,080,908	0	1,080,908
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	34,721	0	34,721
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	44	0	44
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	47,560	0	47,560
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	$(N+O+P+Q+R+S)$	1,163,233	0	1,163,233
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

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	0.00 %	
B	Number of children to be vaccinated with the first dose	Table 4	170,500	0
B1	Number of children to be vaccinated with the third dose	Table 4	166,252	0
C	Number of doses per child	Vaccine parameter (schedule)	3	
D	Number of doses needed	$B + B1 + \text{Target for the 2nd dose } ((B - 0.41 \times (B - B1)))$	505,511	0
E	Estimated vaccine wastage factor	Table 4	1.05	
F	Number of doses needed including wastage	$D \times E$	530,786	0
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.375$ <b>Buffer on doses wasted</b> = <ul style="list-style-type: none"> <li>if <math>(\text{wastage factor of previous year current estimation} &lt; \text{wastage factor of previous year original approved})</math>: <math>((F - D) - ((F - D) \text{ of previous year original approved} - (F - D) \text{ of previous year current estimation})) \times 0.375</math></li> <li>else: <math>(F - D - ((F - D) \text{ of previous year original approved})) \times 0.375 \geq 0</math></li> </ul>	199,045	0
H	Stock to be deducted	$H1 - (F (2015) \text{ current estimation} \times 0.375)$		
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	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	729,850	0	729,850
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	775,012	0	775,012
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	8,029	0	8,029
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	1,077,989	0	1,077,989
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	34,721	0	34,721
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	44	0	44
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	47,432	0	47,432
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	$(N+O+P+Q+R+S)$	1,160,186	0	1,160,186
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

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 Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID**

ID	Source		2014	2015	2016	2017	2018	
	Number of surviving infants	Parameter	#	180,741	184,724	184,724	184,724	184,724
	Number of children to be vaccinated with the first dose	Parameter	#	162,667	166,252	166,252	166,252	166,252
	Number of children to be vaccinated with the third dose	Parameter	#	149,111	157,266	157,266	157,266	157,266
	Immunisation coverage with the third dose	Parameter	%	82.50 %	85.14 %	85.14 %	85.14 %	85.14 %
	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		#	373,373				
	Stock across second level Dec 31, 2014 (if available)*		#					
	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	\$		0.26	0.00	0.00	0.00
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 %

ID	Source		2019	2020	TOTAL	
	Number of surviving infants	Parameter	#	184,724	184,724	1,289,085
	Number of children to be vaccinated with the first dose	Parameter	#	166,252	166,252	1,160,179
	Number of children to be vaccinated with the third dose	Parameter	#	157,266	157,266	1,092,707
	Immunisation coverage with the third dose	Parameter	%	85.14 %	85.14 %	
	Number of doses per child	Parameter	#	3	3	
	Estimated vaccine wastage factor	Parameter	#	1.05	1.05	
	Number of doses per vial	Parameter	#	1	1	
	AD syringes required	Parameter	#	Yes	Yes	
	Reconstitution syringes required	Parameter	#	No	No	
	Safety boxes required	Parameter	#	Yes	Yes	
cc	Country co-financing per dose	Parameter	\$	0.00	0.00	
ca	AD syringe price per unit	Parameter	\$	0.0448	0.0448	
cr	Reconstitution syringe price per unit	Parameter	\$	0	0	
cs	Safety box price per unit	Parameter	\$	0.0054	0.0054	
fv	Freight cost as % of vaccines value	Parameter	%	3.10 %	3.10 %	

\* 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.

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

Co-financing group	Intermediate
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	2014	2015	2016	2017	2018
Minimum co-financing	0.23	0.26	0.30	0.35	0.40
Recommended co-financing as per			0.30	0.35	0.40
Your co-financing	0.23	0.26			

	2019	2020
Minimum co-financing	0.46	0.53
Recommended co-financing as per	0.46	0.53
Your co-financing		

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

		2014	2015	2016	2017	2018
Number of vaccine doses	#	570,600	232,200	282,600	649,800	649,800
Number of AD syringes	#	602,800	230,800	282,000	685,800	685,800
Number of re-constitution syringes	#	0	0	0	0	0
Number of safety boxes	#	6,700	2,575	3,125	7,150	7,150
Total value to be co-financed by GAVI	\$	2,091,500	848,500	996,000	2,288,000	2,253,500

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

		2019	2020
Number of vaccine doses	#	649,800	649,800
Number of AD syringes	#	685,800	685,800
Number of re-constitution syringes	#	0	0
Number of safety boxes	#	7,150	7,150
Total value to be co-financed by GAVI	\$	2,201,500	2,198,500

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

		2014	2015	2016	2017	2018
Number of vaccine doses	#	39,600	19,800	0	0	0
Number of AD syringes	#	40,500	17,900	0	0	0
Number of re-constitution syringes	#	0	0	0	0	0
Number of safety boxes	#	450	200	0	0	0
Total value to be co-financed by the Country [1]	\$	140,500	66,000	0	0	0

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

		2019	2020
Number of vaccine doses	#	0	0
Number of AD syringes	#	0	0
Number of re-constitution syringes	#	0	0

<b>Number of safety boxes</b>	#	0	0
<b>Total value to be co-financed by the Country [1]</b>	\$	0	0

**Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 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	162,667	166,252	
C	Number of doses per child	Vaccine parameter (schedule)	3	3	
D	Number of doses needed	$B \times C$	488,001	498,757	
E	Estimated vaccine wastage factor	Table 4	1.05	1.05	
F	Number of doses needed including wastage	$D \times E$		523,694	
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$			
H	Stock to be deducted	H2 of previous year - $0.25 \times F$ of previous year			
H2	Reported stock on January 1st	Table 7.11.1	0	373,373	
I	Total vaccine doses needed	Round up $((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$		252,000	
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	$N \times \text{freight cost as \% of vaccines value (fv)}$			
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	$U / T$			

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

		Formula	2016		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	498,756	0	498,756
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	523,694	0	523,694
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	0	0	0
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$	242,450	0	242,450
H2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	282,600	0	282,600
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	281,937	0	281,937
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	3,109	0	3,109
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	954,623	0	954,623
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	12,631	0	12,631
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	17	0	17
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	28,639	0	28,639
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	$(N+O+P+Q+R+S)$	995,910	0	995,910
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

**Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 3)**

		Formula	2017		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	498,756	0	498,756
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	523,694	0	523,694
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	124,689	0	124,689
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	649,800	0	649,800
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	685,790	0	685,790
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	7,148	0	7,148
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	2,159,936	0	2,159,936
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	30,724	0	30,724
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	39	0	39
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	97,198	0	97,198
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	$(N+O+P+Q+R+S)$	2,287,897	0	2,287,897
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		





**Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 5)**

		Formula	2019		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	498,756	0	498,756
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	523,694	0	523,694
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	124,689	0	124,689
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	649,800	0	649,800
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	685,790	0	685,790
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	7,148	0	7,148
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	2,105,352	0	2,105,352
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	30,724	0	30,724
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	39	0	39
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	65,266	0	65,266
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	$(N+O+P+Q+R+S)$	2,201,381	0	2,201,381
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		

**Table 7.11.4: Calculation of requirements for Pneumococcal (PCV13), 1 dose(s) per vial, LIQUID (part 6)**

		Formula	2020		
			Total	Government	GAVI
A	Country co-finance	V	0.00 %		
B	Number of children to be vaccinated with the first dose	Table 4	166,252	0	166,252
C	Number of doses per child	Vaccine parameter (schedule)	3		
D	Number of doses needed	$B \times C$	498,756	0	498,756
E	Estimated vaccine wastage factor	Table 4	1.05		
F	Number of doses needed including wastage	$D \times E$	523,694	0	523,694
G	Vaccines buffer stock	<b>Buffer on doses needed + buffer on doses wasted</b> <b>Buffer on doses needed</b> = $(D - D \text{ of previous year original approved}) \times 0.25$ <b>Buffer on doses wasted</b> = $(F - D) \times [XXX] - ((F - D) \text{ of previous year current estimate}) \times 0.25$	124,689	0	124,689
H	Stock to be deducted	$H2 \text{ of previous year} - 0.25 \times F \text{ of previous year}$			
H2	Reported stock on January 1st	Table 7.11.1			
I	Total vaccine doses needed	$\text{Round up}((F + G - H) / \text{vaccine package size}) \times \text{vaccine package size}$	649,800	0	649,800
J	Number of doses per vial	Vaccine Parameter	1		
K	Number of AD syringes (+ 10% wastage) needed	$(D + G - H) \times 1.10$	685,790	0	685,790
L	Reconstitution syringes (+ 10% wastage) needed	$(I / J) \times 1.10$	0	0	0
M	Total of safety boxes (+ 10% of extra need) needed	$(I / 100) \times 1.10$	7,148	0	7,148
N	Cost of vaccines needed	$I \times \text{vaccine price per dose (g)}$	2,102,103	0	2,102,103
O	Cost of AD syringes needed	$K \times \text{AD syringe price per unit (ca)}$	30,724	0	30,724
P	Cost of reconstitution syringes needed	$L \times \text{reconstitution price per unit (cr)}$	0	0	0
Q	Cost of safety boxes needed	$M \times \text{safety box price per unit (cs)}$	39	0	39
R	Freight cost for vaccines needed	$N \times \text{freight cost as of \% of vaccines value (fv)}$	65,166	0	65,166
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	$(N+O+P+Q+R+S)$	2,198,032	0	2,198,032
U	Total country co-financing	$I \times \text{country co-financing per dose (cc)}$	0		
V	Country co-financing % of GAVI supported proportion	$U / T$	0.00 %		



## 8. Health Systems Strengthening Support (HSS)

Please complete and attach the [HSS Reporting Form](#) to report on the implementation of the new HSS grant which was approved in 2012 or 2013.

## 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

Lao People's Democratic Republic **has NOT received GAVI TYPE A CSO support**

Lao People's Democratic Republic is not reporting on GAVI TYPE A CSO support for 2014

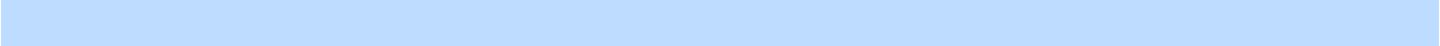
## 9.2. TYPE B: Support for CSOs to help implement the GAVI HSS proposal or cMYP

Lao People's Democratic Republic **has NOT received GAVI TYPE B CSO support**

Lao People's Democratic Republic 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
<b>Summary of income received during 2014</b>		
Income received from GAVI	57,493,200	120,000
Income from interest	7,665,760	16,000
Other income (fees)	179,666	375
<b>Total Income</b>	<b>38,987,576</b>	<b>81,375</b>
<b>Total expenditure during 2014</b>	<b>30,592,132</b>	<b>63,852</b>
<b>Balance as of 31 December 2014 (balance carried forward to 2015)</b>	<b>60,139,325</b>	<b>125,523</b>

\* 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
<b>Salary expenditure</b>						
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
<b>Non-salary expenditure</b>						
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
<b>Other expenditures</b>						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
<b>TOTALS FOR 2014</b>	<b>42,000,000</b>	<b>87,663</b>	<b>30,592,132</b>	<b>63,852</b>	<b>11,407,868</b>	<b>23,811</b>

\*\* 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
<b>Summary of income received during 2014</b>		
Income received from GAVI	57,493,200	120,000
Income from interest	7,665,760	16,000
Other income (fees)	179,666	375
<b>Total Income</b>	<b>38,987,576</b>	<b>81,375</b>
<b>Total expenditure during 2014</b>	<b>30,592,132</b>	<b>63,852</b>
<b>Balance as of 31 December 2014</b> (balance carried forward to 2015)	<b>60,139,325</b>	<b>125,523</b>

\* 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
<b>Salary expenditure</b>						
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
<b>Non-salary expenditure</b>						
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
<b>Other expenditures</b>						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
<b>TOTALS FOR 2014</b>	<b>42,000,000</b>	<b>87,663</b>	<b>30,592,132</b>	<b>63,852</b>	<b>11,407,868</b>	<b>23,811</b>

\*\* 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
<b>Summary of income received during 2014</b>		
Income received from GAVI	57,493,200	120,000
Income from interest	7,665,760	16,000
Other income (fees)	179,666	375
<b>Total Income</b>	<b>38,987,576</b>	<b>81,375</b>
<b>Total expenditure during 2014</b>	<b>30,592,132</b>	<b>63,852</b>
<b>Balance as of 31 December 2014 (balance carried forward to 2015)</b>	<b>60,139,325</b>	<b>125,523</b>

\* 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
<b>Salary expenditure</b>						
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
<b>Non-salary expenditure</b>						
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
<b>Other expenditures</b>						
Vehicles	12,500,000	26,090	6,792,132	14,177	5,707,868	11,913
<b>TOTALS FOR 2014</b>	<b>42,000,000</b>	<b>87,663</b>	<b>30,592,132</b>	<b>63,852</b>	<b>11,407,868</b>	<b>23,811</b>

\*\* 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	✓	<a href="#">Signature - Vice Minister of Health and Finance Dept Director.PDF</a> <b>File desc:</b> <b>Date/time :</b> 13/05/2015 02:09:46 <b>Size:</b> 557 KB
2	Signature of Minister of Finance (or delegated authority)	2.1	✓	<a href="#">Signature - Vice Minister of Health and Finance Dept Director.PDF</a> <b>File desc:</b> <b>Date/time :</b> 13/05/2015 02:09:46 <b>Size:</b> 557 KB
3	Signatures of members of ICC	2.2	✓	<a href="#">Signature ICC members.PDF</a> <b>File desc:</b> <b>Date/time :</b> 13/05/2015 02:11:51 <b>Size:</b> 595 KB
4	Minutes of ICC meeting in 2015 endorsing the APR 2014	5.4	✓	<a href="#">ICC minute May 2015.PDF</a> <b>File desc:</b> <b>Date/time :</b> 13/05/2015 02:11:51 <b>Size:</b> 1 MB
5	Signatures of members of HSCC	2.3	✓	<a href="#">Signature ICC members.PDF</a> <b>File desc:</b> There is no HSCC committee in the country <b>Date/time :</b> 13/05/2015 02:11:51 <b>Size:</b> 595 KB
6	Minutes of HSCC meeting in 2015 endorsing the APR 2014	8.9.3	✓	<a href="#">ICC minute May 2015.PDF</a> <b>File desc:</b> There is no HSCC committee in the country <b>Date/time :</b> 13/05/2015 02:11:51 <b>Size:</b> 1 MB
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	X	<a href="#">Laos HPV PIE Report 16June Final.docx</a> <b>File desc:</b> <b>Date/time :</b> 11/05/2015 04:20:20 <b>Size:</b> 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	✓	<a href="#">Bank statement NVI grant 1.pdf</a> <b>File desc:</b> <b>Date/time :</b> 11/05/2015 04:41:21 <b>Size:</b> 1 MB
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	✓	<a href="#">Supporting document.PDF</a> <b>File desc:</b> Letter informing EVM improvement plan implementation status <b>Date/time :</b> 16/05/2015 02:41:39 <b>Size:</b> 391 KB
12	Latest EVSM/VMA/EVM report	7.5	✓	<a href="#">EVM Report LaoPDR 2014.pdf</a> <b>File desc:</b> <b>Date/time :</b> 11/05/2015 04:14:05 <b>Size:</b> 3 MB
13	Latest EVSM/VMA/EVM improvement plan	7.5	✓	<a href="#">Supporting document.PDF</a> <b>File desc:</b> Letter informing valid cMYP <b>Date/time :</b> 16/05/2015 02:42:12 <b>Size:</b> 391 KB
14	EVSM/VMA/EVM improvement plan implementation status	7.5	✓	<a href="#">Supporting document.PDF</a> <b>File desc:</b> Letter informing valid cMYP costing tool <b>Date/time :</b> 16/05/2015 02:42:57 <b>Size:</b> 391 KB
16	Valid cMYP if requesting extension of support	7.8	✓	<a href="#">Supporting document.PDF</a> <b>File desc:</b> Letter informing valid cMYP <b>Date/time :</b> 16/05/2015 02:43:28 <b>Size:</b> 391 KB
17	Valid cMYP costing tool if requesting extension of support	7.8	✓	<a href="#">Supporting document.PDF</a> <b>File desc:</b> Letter informing valid cMYP costing tool <b>Date/time :</b> 16/05/2015 02:44:06 <b>Size:</b> 391 KB
18	Minutes of ICC meeting endorsing extension of vaccine support if applicable	7.8	✓	<a href="#">ICC minute May 2015.PDF</a> <b>File desc:</b> <b>Date/time :</b> 16/05/2015 01:13:14 <b>Size:</b> 1 MB

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	✓	<a href="#">Financial statement on HSS grant.pdf</a> <b>File desc:</b> <b>Date/time :</b> 11/05/2015 04:17:14 <b>Size:</b> 7 MB
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	✓	<a href="#">Bank Statement 1-4-2015.PDF</a> <b>File desc:</b> <b>Date/time :</b> 13/05/2015 02:14:27 <b>Size:</b> 2 MB
21	External audit report for HSS grant (Fiscal Year 2014)	8.1.3	✓	<a href="#">Auditor Report.PDF</a> <b>File desc:</b> Financial statement - Audit report (3) <b>Date/time :</b> 16/05/2015 02:36:02 <b>Size:</b> 815 KB
22	HSS Health Sector review report	8.9.3	✓	<a href="#">APR_2014_HSS_Reporting_19.03.15_EN.docx</a> <b>File desc:</b> <b>Date/time :</b> 11/05/2015 04:27:00 <b>Size:</b> 225 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	✗	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	✓	<a href="#">Bank statement on NVI grant 2.pdf</a> <b>File desc:</b> <b>Date/time :</b> 11/05/2015 04:42:09 <b>Size:</b> 605 KB
27	Minutes ICC meeting endorsing change of vaccine presentation	7.7	✗	No file loaded



28	Justification for changes in target population	5.1	X	No file loaded
	Other		X	<p><a href="#">APR_2014_HSS_Reporting_16_May_2015.docx</a>  <b>File desc:</b> HSS report 2014  <b>Date/time :</b> 16/05/2015 01:15:36  <b>Size:</b> 1 MB</p> <p><a href="#">Financial Statement.PDF</a>  <b>File desc:</b> Letter informing EVM improvement plan  <b>Date/time :</b> 16/05/2015 02:38:49  <b>Size:</b> 1 MB</p> <p><a href="#">Management Letter.pdf</a>  <b>File desc:</b> Letter informing external audit report  <b>Date/time :</b> 16/05/2015 02:37:59  <b>Size:</b> 4 MB</p>

