

## Gavi Alliance Board Meeting

10-11 June 2015

Starling Hotel, Geneva, Switzerland

### 1. Chair's report & presentation of film

- 1.1 Finding a quorum of members present, the meeting commenced at 08.33 Geneva time on 10 June 2015. Dagfinn Høybråten, Board Chair, chaired the meeting.
- 1.2 The Chair referred to the revised agenda which had been circulated to the Board on the previous day, noting that items had been reordered to ensure the Audit and Finance Committee Chair would be present for the financial forecast/programme funding request and internal audit report<sup>1</sup>.
- 1.3 The Chair welcomed new Board members and alternate Board members, as well as René Karsenti, Chair of the International Finance Facility for Immunisation (IFFIm), other directors of the IFFIm Board, and Rob Moodie, new Chair of the Evaluation Advisory Committee. The Chair noted that departing members would be recognised for their service at the dinner that evening.
- 1.4 The Board had met in executive session the evening before to discuss the Board Chair recruitment process and the McKinsey review of Secretariat capacity and resourcing.
- 1.5 Standing declarations of interest were tabled to the Board (Doc 01a in the Board pack). The Chair noted that in the context of the items for decision on the agenda there were a number of Board members who would have conflicts of interest and that these would be raised at the appropriate time and recorded in the applicable parts of the minutes.
- 1.6 The Board noted its minutes from 10-11 December 2014 (Doc 01b), which were approved by no objection on 26 March 2015. The Board also noted its workplan (Doc 01c).
- 1.7 The Chair commented on the structure and content of the papers which had been circulated to the Board for this meeting. He noted that the work had been well prepared through the Board Committees but that some improvements could be made to the papers so that they provide a more general and shorter overview of the key information appropriate for Board member consumption, particularly for Board members who are not members of particular Committees.
- 1.8 Finally, he presented a video on the recent introduction of Japanese encephalitis vaccine in Lao PDR.

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<sup>1</sup> Post-meeting note: These minutes record discussions and decisions in the order originally planned.

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## 2. Consent agenda

- 2.1 The consent agenda included the recommendation of the Governance Committee for Board and Committee member appointments (Doc 02a), Officer appointment (Doc 02b), Executive Committee amendments (Doc 02c) and Measles Supplementary Immunisation Activities.
- 2.2 The Chair indicated that all matters relating to changes to the Executive Committee would be discussed during the report of the Governance Committee Chair under Agenda Item 4.

### **Decision One**

The Gavi Alliance Board:

a) **Appointed** the following Board Members:

- **William Roedy** as an Unaffiliated Board Member in the seat currently held by Marie C. Freire effective 1 August 2015 and until 31 July 2018.
- **Blair Exell** of Australia as Board Member representing the Australia, Japan, Korea and United States donor constituency in the seat formerly held by Clare Walsh of Australia effective immediately and until 30 June 2015.
- **Katherine Taylor** of the United States as Board Member representing the Australia, Japan, Korea and United States donor constituency in the seat formerly held by Clare Walsh of Australia effective 1 July 2015 and until 30 June 2017.
- **Naveen Thacker** as Board Member representing the Civil Society Organisations constituency in the seat currently held by Joan Awunyo-Akaba effective 1 July 2015 and until 30 June 2017.

b) **Reappointed** the following Board Members:

- **HRH the Infanta Cristina of Spain** as an Unaffiliated Board Member until 30 June 2016.
- **Yifeil Li** as an Unaffiliated Board Member until 30 June 2018.

c) **Appointed** the following Alternate Board Members:

- **Blair Exell** of Australia as Alternate Board Member to Katherine Taylor of the United States representing the Australia, Japan, Korea and United States donor constituency in the seat currently held by Katherine Taylor effective 1 July 2015 and until 30 June 2017.

- **Jo-Ann Purcell** of Canada as Alternate Board Member to Donal Brown of the United Kingdom representing the Canada, Ireland, and United Kingdom donor constituency in the seat currently held by Sara Nicholls of Canada effective 1 July 2015 and until 1 July 2016.
  - **Rama Lakshminarayanan** as Alternate Board Member to Tim Evans representing the World Bank in the seat formerly held by Armin Fidler effective immediately and until her successor is appointed and qualified.
  - **Clarisse Loe Loumou** as Alternate Board Member to Naveen Thacker representing the Civil Society Organisations constituency in the seat currently held by Naveen Thacker effective 1 July 2015 and until 30 June 2017.
- d) **Appointed** the following to the Audit and Finance Committee effective 1 July 2015 and until 31 December 2015:
- **Jo-Ann Purcell** in the seat formerly held by Esther Fox.
- e) **Appointed** the following to the Governance Committee effective immediately and until 31 December 2015:
- **Blair Exell**
  - **Rama Lakshminarayanan**
  - **Naveen Thacker** in the seat currently held by Joan Awunyo-Akaba.
- f) **Appointed** the following to the Investment Committee effective 1 August 2015 and until 31 December 2015:
- **William Roedy**.
- g) **Reappointed** the following to the Programme and Policy Committee until 31 December 2015:
- **Clarisse Loe Loumou**.
- h) **Reappointed** the following to the Evaluation Advisory Committee until 31 December 2015:
- **Naveen Thacker**.

*Board members who were candidates for these positions, or whose organisations or constituencies provided candidates for these positions, did not participate in discussion or voting on those appointments.*

## **Decision Two**

The Gavi Alliance Board:

- **Appointed** Philip Armstrong as Secretary with individual signatory authority effective 1 August 2015 and until his successor is appointed and qualified.

### **Decision Three** (See Agenda Item 4)

### **Decision Four**

The Gavi Alliance Board:

- a) **Noted** its decision to support, on an exceptional basis, measles SIAs in six large countries at high risk of measles outbreaks (Afghanistan, Chad, DR Congo, Ethiopia, Nigeria and Pakistan) as taken at its meeting in June 2012.
- b) **Approved** an extension of Gavi support for one additional measles SIA for children under five years of age in each of Ethiopia and DR Congo, which are expected to be conducted in 2015-2016 at an estimate cost of US\$ 30 million; and
- c) **Noted** that the possibility of additional Gavi support for measles SIAs will be considered in the context of a strategy with respect to Gavi's overall involvement in measles and rubella, to be discussed by the PPC in October for possible recommendation to the Board in December 2015.

*Olivier Charmeil (IFPMA) and Adar Poonawalla (DCVMN) recused themselves and did not vote on Decision Four above.*

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## **3. CEO's report**

- 3.1 Seth Berkley, CEO, delivered his report to the Board (Doc 03). He highlighted some of the key events which had taken place since the last Board meeting, and in particular the Gavi replenishment in Berlin in January 2015. He provided information on the new financial contributors to the Alliance, showing that there is now a more diverse financial base, pointed out the increasing commitment from countries in terms of their co-financing contributions, and welcomed a number of announcements from manufacturers which had been made in the context of the replenishment.
- 3.2 The CEO reported on the high number of vaccine introductions which continue to take place and that 2015 is expected to be the peak year for Gavi-supported vaccine introductions. He noted that 2015 is a transition year from implementing the current strategy to preparing for and implementing the 2016-2020 strategy. The latter strategy has a particularly country-centric approach that focuses on coverage, equity and sustainability of immunisation. He highlighted that increased investments in upgrading and expansion of cold chain equipment will be one of the elements which will enable coverage and equity targets to be reached. He highlighted some of the work being carried out in the full country evaluations project, insisted on the importance of the quality of data and reported on some of

the work being done in relation to integration of polio and routine immunisation strengthening.

- 3.5 The CEO also referred to work being done with India to strengthen both routine immunisation and health systems and reminded the Board that an India strategy is being developed and will be discussed by the PPC before being submitted to the Board for approval in December 2015. In relation to sustainability the CEO highlighted the importance of increasing country ownership and self-financing of vaccines and of continuing the market shaping work around vaccine pricing and secure vaccine supply.
- 3.6 He referred to a number of items which are related to and are complementary to Gavi work, namely Ebola, polio, increases in measles incidences worldwide, new impact data on meningitis A and cholera vaccines, progress on development of a malaria vaccine, the work being done in relation to the sustainable development goals (SDGs) and the global financing facility (GFF) for reproductive, maternal, newborn, child and adolescent health, which is to be launched in July.
- 3.7 Finally, he provided an update to the Board on risk management for the Alliance, including the strengthening of relevant teams within the Secretariat, amending the approach to risk based on country risk profiles and the setting up of an internal risk committee.

#### *Discussion*

- The Chair introduced the discussion by highlighting that the past six months had been a time of great challenges in global health with the highlight for Gavi being the replenishment which, due to its success, bestows great responsibility on the Board.
- Board members welcomed the commitments from new donors and noted that, while for some of them the financial commitments are quite modest, they are a first step to leverage further commitments and to raise the profile of Gavi in those countries.
- Board members noted that it would be useful to ensure increased engagement of the Alliance in some international events such as World Immunization Week and the World Health Assembly. Both of these events provide opportunities to engage and discuss a number of challenges around immunisation.
- One Board member declared it was important to recall how far Gavi had come over the past 15 years and what it was originally created to do, in particular as there is now a shift in focus from new vaccine introduction to coverage and equity.
- Board members commended the work done in a short time on polio and routine immunisation and suggested that more thought should be given to Gavi's incredible ability to scale things up and how this could be used going forward.
- Board members noted that there is still a lot of interest in health systems strengthening (HSS), its evolution and the potential role that it can play in

addressing key bottlenecks to coverage and equity of immunisation. In this context it was noted that initiatives in relation to increasing and/or improving cold chain equipment in countries should be seen as an integral part of HSS and not as an individual initiative. The Secretariat noted that a review of Gavi's direct financial support to countries, including HSS, will be on the agenda for the June 2016 Board meeting, following input from the Programme and Policy Committee (PPC).

- Board members welcomed the fact that a measles strategy will be brought to them at their next meeting after review by the PPC. It was pointed out that there are other initiatives and funding sources focusing on measles and rubella and that they should be looked at.
- Board members appreciated the overview provided on potential investments in strategic initiatives to operationalise the new strategy, whilst cautioning that Gavi should take care not to overuse its strategic initiatives budget too early in the next strategic period. One Board member offered to work with the Secretariat on a report template which could be used going forward, and which would include information in relation to trade-offs and opportunity costs.
- Board members also welcomed the information in relation to India and it was emphasised that as the strategy for engagement with India is developed, the trade-offs of certain strategic choices be evaluated.
- Board members welcomed the report on risk management. One member suggested that there should be a standing update on risk, both programmatic and fiduciary. It was considered whether risk oversight should occupy a stand-alone place on each agenda, even though the Board had recently been moving away from standing items. It was emphasised that risk oversight is a cross-cutting consideration that is part and parcel of every matter that comes before the Board and that Board papers contain a section on risk implications and mitigation strategies.
- One Board member indicated that countries would welcome immunisation coverage maps that show detail down to the district level. For example, such visuals can be useful for ministers of health when presenting information to ministers of finance and/or heads of government when seeking support for their national immunisation programmes.
- There was some discussion around the content of the CEO report and whether it should serve as a general overview, a preview of particular issues for discussion or a thematic presentation. The CEO noted that any overview necessarily required content choices and that, given the number of new Board members at each session and the time in between each Board meeting, he felt a general overview was appropriate, with the opportunity for Board members to ask questions on particular areas on which they would like more information.
- Board members acknowledged that the global health and development landscape is changing and that it is crucial that Gavi thinks strategically about this in order to remain a front runner.

- A number of Board members reiterated the importance of working with civil society organisations in country, particularly in relation to advocacy, community systems strengthening and reaching the “fifth child”.
- Board members noted that the introduction of the HPV vaccine is a great opportunity to integrate immunisation services with related health services for adolescents.
- Board members highlighted the importance during the new strategic period of working not only to strengthen country systems (health, financial, human resources etc.) but also to build effective partnerships in countries.

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#### **4. Committee Chair and IFFIm Board reports**

- 4.1 The Chair introduced this item, underlining the importance of the work of the committees and reminding Board members that they are each expected to personally serve on at least one committee.
- 4.2 One Board member reflected that it might be useful to think further around how more support can be given to the committees, whether this be through the appointment of committee vice chairs, or using more working groups/subcommittees.

#### *Executive Committee*

- 4.3 The Chair delivered the report of the Executive Committee noting that it had had one teleconference and two in-person meetings since the December Board meeting, on 2 February, 23 March and 9 June respectively.
- 4.4 During the teleconference in February the Executive Committee had received an update from the CEO on the replenishment, which had taken place the previous week, and on Ebola.
- 4.5 During the in-person meeting on 23 March, Ebola had again been the main item on the agenda. As some of the issues under discussion were commercially sensitive, specific information had not been shared outside the Executive Committee. The Executive Committee also received an update from the Managing Director, Internal Audit & Investigations, on the misuse of funds in Nigeria and the Committee provided guidance on how to proceed. The Executive Committee approved the recommendations of the November 2014 New Proposals IRC for new vaccine support. The Executive Committee also reviewed the CEO’s performance and set his goals for 2015.
- 4.6 During its meeting on 9 June the Executive Committee again discussed commercially sensitive matters pertaining to Ebola. The Chair had also reported on a letter received earlier from the Permanent Secretary at the Ministry of Health in Nigeria, which requested an independent reconciliation and verification of the

misuse case. The Executive Committee determined that no new information had been submitted that had caused it to reconsider its 23 March guidance.

### *Governance Committee*

- 4.7 Flavia Bustreo, Vice Chair of the Board and Governance Committee Chair, delivered the report of the Governance Committee noting that it had had three meetings since the December 2015 Board meeting, one on 23 March, a teleconference on 4 June and a meeting on 9 June. She highlighted that a lot of work had been done between meetings by subcommittees and others, supported by Kevin A. Klock, Head of Governance and Assistant Secretary, and the Secretariat governance team.
- 4.8 The Governance Committee Chair reminded Board members on how the nominations processes are defined by the different organisations and constituencies. She highlighted that submitting nominations along with a brief process note in a timely manner is important to ensure that any potential problems with the process could be identified and clarified before the Governance Committee meets to review and forward recommendations.
- 4.9 She reminded Board members that the committees will be refreshed at the end of this year, and that all Board members are expected to be a member of at least one committee.
- 4.10 The Governance Committee Chair reminded the Board that it had endorsed the new Executive Committee functions in December 2014 and that the redesigned charter tabled to the Board would officially integrate these new functions (Doc 02c, Annex 1)
- 4.11 In the meantime, work had continued on a proposed new composition. During its meeting on the previous day, the Governance Committee had agreed on a recommendation to put forward to the Board which had subsequently been circulated to the Board and was now being recommended for approval.
- 4.12 A number of Board members indicated that they would not be comfortable approving the proposed composition. Some pointed out that reducing the number of Unaffiliated Board Members would be in contradiction of best governance practices and that ensuring independence and transparency is critically important. Others raised concerns about losing the perspectives of multilateral organisations, who are founding members of the Alliance. As a result, while the redesigned charter integrating the new functions was approved, the composition matter was referred back to the Governance Committee for further analysis and discussion.
- 4.13 Some Board members, while recognising that an affirmative vote of the Board was needed to change the *status quo*, pointed out that the current composition was not acceptable to them. It was hoped that a revised composition that could achieve a consensus vote of the Board could be found by the December 2015 Board meeting.

### **Decision Three**



The Gavi Alliance Board:

- **Amended** the Executive Committee Charter as attached in Doc 02c, Annex 1.

*Programme and Policy Committee*

- 4.14 Richard Sezibera, Programme and Policy Committee (PPC) Chair delivered the report of the PPC by pre-recorded video noting that the Committee had met on 4-6 May 2015 and had had a teleconference on 21 May 2015. He highlighted that the meetings of the PPC were particularly critical as many of the topics to be discussed were key to the successful implementation of the 2016-2020 Gavi Strategy.
- 4.15 He informed the Board that the PPC had received a country programmes update where Alliance Partners had highlighted successes and challenges of Gavi's ongoing work.
- 4.16 He indicated that the Secretariat had presented findings from the in-depth review of Gavi's eligibility, graduation and co-financing policies. The PPC had agreed that graduation failure would be very serious and that Gavi must do more to mitigate this risk. The PPC had agreed on the proposed aspirational vision for a successful transition as reflected in the new policy, the need to act earlier to prepare countries for that transition, the desire to keep using GNI per capita as the indicator for eligibility and not to change Gavi's GNI threshold. There were important differences in views between different PPC members on the proposal to extend the graduation period for countries that face a very steep ramp-up in vaccine costs as they transition out of Gavi support. Alternative options were prepared by the Secretariat, at the request of the PPC, and during the PPC call on 21 May consensus emerged around an option with two components with agreement on a final version of the option being achieved following a discussion over email. The PPC Chair thanked the PPC and the Secretariat for their hard work to develop a solution that reflects the diverse views of the Alliance and that will be critical for sustaining strong immunisation programmes in countries as they start to move out of Gavi support.
- 4.17 The PPC had also received information on the main findings of the review of Gavi's co-financing policy and endorsed the proposed changes. Information was provided to the PPC on Gavi's support for measles and a number of options which could be considered by Gavi going forward were presented. The PPC asked the Secretariat to work further on the options to be submitted to the Committee in October.
- 4.18 The Secretariat gave an overview of actions undertaken in response to policy and programmatic recommendations made by the Independent Review Committee and High Level Review Panel, the latter of which met for the first time in 2014.
- 4.19 PPC members were reminded of the Board's request for a comprehensive approach to the Alliance's engagement with India during 2016-2020. Following the discussion on the proposed principles of Gavi support and a framework for Alliance engagement with India, the PPC recommended that a comprehensive package of

support be submitted to the PPC for endorsement at its October 2015 meeting and subsequently to the Board for a decision in December 2015.

- 4.20 The Secretariat presented an update on market shaping results from 2014, implementation and strategic planning. PPC members also reviewed and provided guidance on the goal levels indicators and indicators for the disease dashboard for the Gavi strategy 2016-2020. Guidance was requested from the PPC in relation to work being carried out on investments in data and measurement as part of the Gavi strategy for 2016-2020 strategy. The Secretariat will convene a consultative process to detail the goals and priority fields of engagement, conduct prioritisation of countries, determine engagement modalities and potential investment amounts. The PPC will review a detailed proposal based on this work at its October meeting.
- 4.21 The PPC was presented with information on CSO engagement in Gavi's HSS mechanism. PPC members acknowledged that it would be important to demonstrate impact to justify any increase in funding to be provided to CSOs within the partners engagement framework. PPC also noted that measuring impact of CSOs into immunisation is a challenge. An assessment of Gavi's support for national CSO platforms in 24 countries will be available in mid-2015 and will help inform strategic discussions about Gavi's support to CSOs.
- 4.22 Finally, the PPC Chair thanked PPC members for their participation in the fruitful discussions. He informed the Board that the PPC, at the end of its meeting on 6 May, had had an opportunity to brainstorm on how it might improve its operations and that he, as Chair, was looking forward to exploring these over the coming months with the PPC and the Secretariat.

#### *Audit and Finance Committee*

- 4.23 Wayne Berson, Audit and Finance Committee Chair, delivered the report of the Audit and Finance Committee (AFC) noting that it had had two meetings by teleconference since the December 2014 Board meeting, one on 25 February and one on 22 May.
- 4.24 During its May meeting the Committee received information from KPMG and the Secretariat on the 2014 audit plan. The AFC had also reviewed amendments to Gavi's accounting policies.
- 4.25 The Committee also reviewed Gavi's long-term financial forecast, two programme funding requests, and a programme expenditure report. The Secretariat had provided an update on the 2014 business plan expenditures and on the proposed process and calendar for the 2016-2017 Partners' Engagement Framework.
- 4.26 The Committee also received a regular report from the Managing Director, Audit and Investigations. It had also reviewed currency hedging activities. The AFC also discussed the project plan for updating the programme funding policy and reviewed Gavi's insurance coverages.

#### *Investment Committee*

- 4.27 Stephen Zinser, Investment Committee Chair, delivered the report of the Investment Committee, which had met twice since the December Board meeting (18 February and 29 May). He updated the Board on the portfolio including the asset allocation and risk profile and highlighted that the total portfolio generated estimated year-to-date net investment income of US\$ 31.7 million, and since inception US\$ 421 million. He explained what the Committee was doing to improve its socially responsible investment policy and its consultant expertise. He also commented that the portfolio was well positioned to weather anticipated volatile markets.
- 4.28 It was asked to what extent assets in the long term portfolio could be mobilised quickly and if there were special restrictions on liquidating these assets. It was reported that long term assets could generally be mobilised if called on, and in fact, the Secretariat and the Investment Committee seek to anticipate when a draw down might be needed and plan accordingly.

#### *Evaluation Advisory Committee*

- 4.29 Rob Moodie, Evaluation Advisory Committee (EAC) Chair, delivered the report of the EAC noting that it had had one meeting since the December Board meeting on 18-19 March 2015. He reported that the EAC had approved a Request for Proposals for the Pilot Pneumococcal Vaccines Advance Market Commitment Outcomes and Impact Evaluation and had received an extensive report on the Full Country Evaluations project. He also informed Board members that the EAC had been asked to provide guidance on the specific objectives and scope of the new evaluation work to be commissioned in relation to Gavi's HSS support but had felt that a discussion with the Board regarding the timing of a wider evaluation of the HSS grant window would be necessary before the objectives and scope could be finalised. The discussion could take place as part of the pre-Board technical briefing session planned for December 2015.
- 4.30 Board members noted that the work of the EAC is becoming increasingly important. The donor constituency in particular expressed a wish to engage further on this work going forward.

#### *International Finance Facility for Immunisation*

- 4.31 René Karsenti, Chair of the IFFIm Board, delivered a report of the activities of the IFFIm Company. He reported on the inception-to-date proceeds IFFIm had provided to Gavi for vaccine programmes. He also reported on an award-winning sukuk transaction closed in November 2014 that had helped to raise Gavi's profile in the Middle East during the replenishment. He discussed IFFIm's strategic planning activities, noting that IFFIm is being positioned as a sustainable financing mechanism of note during the upcoming International Conference on Financing for Development in Addis Ababa. Finally, he introduced Fatimatou Zahra Diop, former Secretary-General of the Central Bank of West African States (BCEAO), as a new member of the IFFIm Board.

- 4.32 The Gavi Board Chair noted a number of exciting developments including activity in the Middle East, and IFFIm's place in the sustainable development financing agenda. He also welcomed Ms Diop to IFFIm.
- 4.33 It was asked why IFFIm entered swaps arrangements and whether those arrangements required IFFIm to post collateral. Dr Karsenti reported that IFFIm entered swaps contracts with the World Bank to hedge against interest rate and currency risk. However, the contracts allow the World Bank to call collateral if the severity of the risk becomes too pronounced and IFFIm's credit rating sufficiently deteriorates. Dr Karsenti confirmed IFFIm had not needed to post collateral as the Board had worked with the World Bank on ways to manage IFFIm's exposure, including asking donors to make pledge payments in US Dollars wherever possible.

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## **5. Strengthening country transitions out of Gavi support**

- 5.1 Seth Berkley, CEO, introduced this item (Doc 05), highlighting that eligibility, co-financing, and transitioning from Gavi support had been analysed as one complete package and that decisions on these items came at a critical time as Gavi moves into a new strategy. He informed Board members that a lot of work had been done to go through the evidence, looking at the past and projecting forward to anticipate risk. Detailed risk assessments had been carried out to inform the new policies. He also pointed out that although attempts at risk mitigation were important, there were no guarantees that any changes would ultimately predict countries success. During the discussions a broad spectrum of views had been expressed and the final proposal aimed to strike a balance between these different views.
- 5.2 Judith Kallenberg, Head of Policy, presented information to the Board on the eligibility and transition policy review process, the different phases of transition, the financial implications of the proposed new policy, and the potential risks and mitigation.

### *Discussion*

- Board members commended the work that had been done on this by the Secretariat and Alliance Partners and indicated their support for the proposed new eligibility and transition policy. It is not only in the interest of countries but also in the interest of the Alliance to ensure sustainability of the investments which have been and will be made in countries.
- It was noted that this is an area in which both countries and donors have strong interest. It will be important to ensure that country representatives are engaged with the PPC and the Board to ensure that their priorities are taken into consideration when Gavi policies are being reviewed and implemented.

- Board members agreed on the importance of ensuring country ownership and building broad support and commitment for immunisation. This will require a change in the way in which the Alliance engages with countries. Earlier engagement will be essential to assess readiness for transitioning out of Gavi support and to develop and implement transition plans in which the role of partners is also made clear.
- A number of the representatives from the Developing Country constituency welcomed the fact that the new policy takes into consideration the implications of rapid GNI growth on eligibility for Gavi support.
- It was agreed to ensure that countries are properly informed about the new policy in general, and more specifically on implications on their own individual situations, through an easy to understand communication.
- Board members noted that the catalytic support proposed for Phase 2 countries is for the introduction of HPV, MR and JE vaccines only because some of these countries had begun the transition from Gavi support prior to the opening of the applicable funding window.
- Board members noted that some countries are facing challenges of currency deflation thus placing additional pressure on further investments in vaccines. These countries therefore welcome any measures that could be put in place to ensure that they do not come under further pressure.
- A number of Board members supported a proposal that regular reporting be provided either to the PPC or to the Board on implementation of the new policies. This will enable close monitoring of country performance by the PPC and Board to enable timely interventions if required.
- Board members noted that some of the terminology used, in particular “Phase 3”, could be misleading for countries and the Secretariat noted that different terminology will be used for external communications in order to avoid misunderstandings.

### **Decision Five**

The Gavi Alliance Board:

- a) **Approved** the Eligibility & Transition Policy attached as Annex A to Doc 05.
- b) **Noted** the importance of enhancing Gavi’s approach to supporting country transitions and **requested** the Secretariat and Alliance Partners to scale up their engagement with countries as they (prepare for the) transition to full self-financing as described in section 11.3 of Doc 04 of the 4-6 May PPC meeting.
- c) **Approved** providing a time-limited opportunity to access exceptional catalytic support for the introduction of HPV, MR and/or JE vaccines for those Phase 2

countries that did not have the possibility to apply for these vaccines, due to the timing of the vaccines' availability.

*Olivier Charmeil (IFPMA) and Adar Poonawalla (DCVMN) recused themselves and did not vote on Decision 5c) above.*

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## **6. Review of Gavi's co-financing policy**

- 6.1 The Chair introduced this item briefly (Doc 06) by drawing the Board's attention to the fact that in addition to the recommendation which is in the paper the Board may wish to consider approving an amendment to the policy based on information which arose during consultations with UNICEF at the request of the PPC.
- 6.2 Santiago Cornejo, Head, Financial Sustainability & Graduation, presented a summary of the main findings of the policy review.

### *Discussion*

- Board members welcomed the proposed amendments to the co-financing policy and mentioned in particular measures proposed to break the "vicious cycle of default" which some countries can face. One Board member suggested that it could be useful to see an analysis of why countries are not meeting their co-financing payment requirements and see what can be done on a case by case basis.
- Board members agreed on the importance of countries considering the full cost of immunisation and not just the cost of vaccine procurement, in particular for those countries that have high vaccine uptake and are entering the transition phase. In this context the importance of assisting countries to develop financial sustainability plans was highlighted, including through innovative financing mechanisms.
- The importance of ensuring political will at the highest levels was also highlighted, as was the importance of ensuring that the implications of the new policy are communicated to countries and partners in a transparent way.
- The Secretariat noted that there will be four important steps to operationalising the policy to ensure that there are no unintended consequences such as disincentivising the creation of innovative vaccines or disrupting the supply of certain categories of vaccines - 1) country dialogue and understanding how countries make decisions on product preferences beyond vaccine prices; 2) accurate demand forecasting by gathering intelligence through partners and others in terms of the products countries are likely to be interested in so that there can be long term visibility and planning; 3) ensuring supply security which will include monitoring and providing assistance should switches be recommended with the tender cycles so as to ensure visibility and predictability; 4) ongoing monitoring of the rate of different switches that may be required.

- Board members agreed to including language on vaccine presentation preferences in the policy following the discussions that had taken place with UNICEF at the request of the PPC.

## **Decision Six**

The Gavi Alliance Board:

- **Approved** the Gavi Co-financing Policy attached as Annex A to Doc 05 to the PPC, subject to including the principle that if countries' preferred presentation is not available in the short-term, their co-financing contributions may be adjusted based on their preferred presentation.

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## **7. Gavi support for access to appropriate pricing for Gavi graduated countries**

7.1 Richard Sezibera, Chair of the PPC, delivered comments on this item by pre-recorded video, noting that the Secretariat had presented a proposed approach to support for access to appropriate pricing for Gavi graduated countries (Doc 07) to the PPC at its meeting on 4-6 May 2014. He highlighted that the PPC had endorsed the recommendation which includes both a tendering component, which provides countries with continued access to Gavi prices for specific vaccines through inclusion in UNICEF tenders, and a payment component, which helps to address challenges countries may face with pre-paying for vaccines. PPC members had noted the importance of providing countries with visibility to future vaccine pricing and acknowledged that the proposed solution is a balanced approach that takes into account the input of stakeholders across the Alliance. PPC members also recognised the importance of related global initiatives that look beyond Gavi countries and pricing, such as the WHO Middle Income Country Strategy. Finally, the PPC had requested the Secretariat to continue working towards a collaborative agreement with PAHO, which would enable implementation of the tendering component of the proposed approach.

7.2 Wilson Mok, Senior Manager, Price Forecasting, presented information to the Board on the objective of the work carried out in relation to Gavi support for access to appropriate pricing for Gavi graduated countries. He highlighted that an effective solution requires appropriate pricing along with the ability to access that pricing and provided information on the proposed solution to addressing gaps which had been identified as part of the work on this issue. He provided information on the collaborative engagement with PAHO which helped to enable this proposal and addressed some of the risks, their implications, and mitigation strategies.

### *Discussion*

- The Board member representing the developing countries vaccine manufacturers welcomed this initiative but cautioned against a situation where pressures on industry might result in manufacturers withdrawing from the market due to unsustainability. He highlighted the importance for the Alliance of not only working with countries but also continuing to work closely with industry so that their views can also be taken on board.

- Board members noted concerns from industry that should this policy represent a rigid procurement model in which all Gavi procured vaccines are systematically made available to future Phase 3 countries irrespective of economic growth there may be a perverse effect on incentivising manufacturers to offer Gavi the lower price and could result in supply constraints.
- Board members noted that procurement strategies and tender structures vary from vaccine to vaccine and in this context noted a request from industry to ensure that the tender instruments allow individual manufacturers the discretion to submit offers which in terms of pricing differentiate between countries of different economic circumstance and ability to pay. The Secretariat clarified that UNICEF works through public procurement processes and that it is up to ~~the each~~ individual manufacturers to decide how ~~it they~~ wishes to take part and make ~~its their~~ offers in terms of price and volumes, and supply security remains a key concern that will be monitored throughout.
- Board members representing the developing country constituency welcomed this initiative and expressed the hope that the five year exit strategy would be sufficient to ensure a healthy market dynamic and sufficient vaccine supply.
- Board members congratulated the Secretariat on the agreement which had been reached with PAHO in the context of this work.
- The Board member representing UNICEF recalled that UNICEF is a development agency and as such strongly advocates that governments have independent and strong systems, including for vaccine procurement. The mechanisms made available by UNICEF should not be used at the expense of government systems. She highlighted that in relation to tendering, UNICEF and partners need to retain flexibility to develop a procurement strategy based on the market. In response to questions related to the Vaccine Independence Initiative she indicated that it has been in existence since the 1990's and its aim is to support countries on the timing of cash flow. She referred to Annex E in the report which describes the capitalisation required up to 2020 and noted that UNICEF was working with donors with the aim of ensuring this increase in capitalisation. The level of investment from Gavi will be reviewed over time.
- In response to a query from the Board member, the CEO clarified that it is not Gavi's role to assist countries who may be interested in investing in vaccine production.
- The Secretariat noted that the ATAP acronym had been a working title for this project and would no longer be used going forward.

### **Decision Seven**

The Gavi Alliance Board:

- **Approved** the Alliance's approach to ensuring access to appropriate pricing for Phase 3 [graduated] Gavi countries by:



1. Continuing to seek appropriate and sustainable prices through market shaping activities consistent with Gavi's Vaccine Supply and Procurement Strategy.
2. Allowing Phase 3 [graduated] Gavi countries to be included in UNICEF tenders on behalf of Gavi-eligible and Phase 2 [graduating] countries for specific vaccines with the aim of continuing to provide them with access to Gavi prices for a five year period (provided a country commits to key terms to be defined by UNICEF and Gavi).
3. Providing a catalytic investment of US\$ 5 million towards the capitalisation of UNICEF's Vaccine Independence Initiative (VII), a revolving fund which supports timely availability of financing for countries to meeting payment terms. The use of this investment will be prioritised towards Gavi countries, subject to UNICEF approval of each country application to participate in VII. In 2017, the PPC will review the performance of the investment to determine whether there is a need to adjust the amount.

*Laura Laughlin (IFPMA) and Adar Poonawalla (DCVMN) recused themselves and did not vote on Decision Seven above.*

*Shanelle Hall (UNICEF) recused herself and did not vote on Decision 7(3) above.*

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## **8. Chair's reflections on the day**

- 8.1 The Chair provided some reflections on the Board's deliberations during the first day of its meeting.

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## **9. Chair's overview**

- 9.1 The Chair reflected briefly on the Board dinner which had taken place on the previous evening and then introduced a short film on the impact of PCV in Kenya.

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## **10. A new Gavi Engagement Framework for implementing the Gavi 2016-2020 Strategy**

- 10.1 Richard Sezibera, Chair of the PPC, delivered comments on this item by pre-recorded video, noting that the PPC had received a summary of the key programmatic aspects of the new Partners' Engagement Framework to implement the Gavi 2016-2020 Strategy (Doc 10). The PPC had welcomed the new framework and particularly appreciated its new country-centric approach and focus on accountability of partners funded under the new framework. With regards to the country-centric approach, the PPC members agreed with the fact that the bulk of funding would be dedicated to targeted country assistance, and noted that harmonisation at country level with bilaterals will be key to success. On

accountability, the PPC emphasised the need to develop key performance indicators for the Alliance and looked forward to their involvement in supporting elaboration going forward. The PPC also endorsed the concept of Foundational Support to partners which will enable them to manage, and potentially restructure, their resources for the new strategic period.

- 10.2 Anuradha Gupta, Deputy CEO, then briefly reviewed this item, reminding the Board that the proposed engagement framework stemmed from a series of consultations and guidance provided by the Board and Board Committees since June 2014. She indicated that the proposal includes a modified structure for the coordination and funding of Gavi partners and highlighted the features of the new framework.
- 10.3 Adrien de Chaisemartin, Director, Strategy, Risk and Performance, presented more details on the proposed engagement framework, focusing on the new structure of the partners' engagement framework which will include targeted country assistance, special investments in strategic focus areas and foundational support. He highlighted that robust accountability mechanisms will be put in place and he outlined the proposed governance calendar for review and approval of the different elements of the framework.

### *Discussion*

- Board members commended the work done and expressed particular appreciation for the county centric approach, with increased technical assistance, clear definition of the roles of different partners and the focus on accountability.
- Board members agreed on the importance of stressing that this is a new approach and that in order to ensure that the objectives of the new strategy are met things will need to be done differently.
- Board members recognised the importance of engaging leadership at the highest level in countries to help ensure success of the national immunisation programmes. High-level leadership engagement also at regional and international levels is critical.
- The importance of including in-country partnerships was highlighted and reference was made in particular to non-governmental organisations working at the local level. The importance of developing new partnerships was highlighted.
- Board members very much welcomed the proposed accountability mechanisms and highlighted in particular the importance of the Alliance KPIs.
- The Secretariat indicated that evaluation is a key part of the accountability framework and that there will be independent evaluations to assess the overall efficiency and effectiveness of the new approach.
- Some Board members expressed an interest in having information going forward on the impact of the foundational support for partners at the country level.

- Board members noted that a Partners' Engagement Framework (PEF) management group will be set up which will not only comprise key partners but also key co investors.
- The Secretariat highlighted that under the new architecture the Board would approve an envelope for targeted country assistance and then based on the recommendation of the PEF management group the CEO would decide on the allocation of that funding, similar to the way programme funding is handled, reporting back to the Board as appropriate.
- Board members agreed that it would not be necessary for the Executive Committee to review the engagement framework in November 2015 before submission to the Board for approval.

### **Decision Eight**

The Gavi Alliance Board:

- a) **Approved** the new Gavi Engagement Framework, the structure for the Partners' Engagement Framework (PEF) and the governance approval process for the PEF and Secretariat Engagement as set out in Sections 6 and 10 (a, c-e) of Doc 10.
- b) **Approved** commitments in an annual amount of US\$ 31.2 million for the Foundational Support for partners in the years 2016 and 2017 and, subject to satisfactory performance, in the annual amount of US\$ 31.2 million for the Foundational Support for partners in the years 2018-2020. The detail by partner of the annual funding commitment of US\$ 31.2 million is as follows:
  - i. WHO: US\$ 19.3 million;
  - ii. UNICEF: US\$ 9.3 million;
  - iii. World Bank: US\$ 1.7 million;
  - iv. CSO constituency: US\$ 0.5 million; and
  - v. CDC: US\$ 0.4 million.
- c) **Approved** annual commitments in an annual amount of US\$ 5.2 million for the Foundational Support for IPV introduction in the years 2016 and 2017 for WHO and UNICEF as follows:
  - i. WHO: US\$ 3.5 million; and
  - ii. UNICEF: US\$ 1.7 million.

*Jean-Marie Okwo-Bele (WHO) recused himself and did not vote on Decision 8 (b)(i), (c)(i) above.*

*Shanelle Hall (UNICEF) recused herself and did not vote on Decision 8 (b)(ii), (c)(ii) above.*

*Rama Lakshminarayanan (World Bank) recused herself and did not vote on Decision 8 (b)(iii) above.*

*Joan Awunyo-Akaba (Civil Society Organisations) recused herself and did not vote on Decision 8 (b)(iv) above.*

*Samba Sow (Research & Technical Health Institutes) recused himself and did not vote on Decision 8 (b)(v) above.*

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## **11. Gavi Alliance Strategy 2016-2020 – goal level indicators and disease dashboard**

11.1 Peter Hansen, Director, Monitoring & Evaluation, presented the recommended indicators for Aspiration 2020, the disease dashboard and strategic goals 1, 3 and 4 of the 2016-2020 strategy (Doc 11). He reported that the indicators for strategic goal 2 are still under development and will be brought to the Board for approval at its meeting in December 2015.

### *Discussion*

- Board members welcomed the work which had been done and the inclusive process. Special mentions were made in relation to the innovative indicator on gender and equity and the links between HSS investments and the broader coverage and equity agenda.
- Board members noted that it is foreseen that the indicators and the data underlying the concept around the disease dashboard will rely on existing data and a bottom-up approach. The primary indicators will be supplemented by additional indicators at the secondary level. The disease dashboard will leverage substantial investments in data already made by countries and partners.
- One Board member suggested that it would be useful to see a greater focus on measuring integration and proposed that it might be possible to explore to what extent integration could be measured at the decision making level in order to increase transparency on how immunisation is integrated into the overall health systems decision making processes.
- The Board member representing the vaccine manufacturers from industrialised countries suggested that following the planned review of the supply and procurement strategy it might be necessary to review the indicators for strategic goal 4 and hoped that there would be sufficient flexibility to do so if required.
- One Board member pointed out that most of the indicators are not within the control of the Secretariat or the Alliance alone and that the focus is contribution rather than attribution. Wherever feasible, the indicators track outcomes rather than outputs or processes. It was pointed out that it will be important to distinguish between general global health indicators and process oriented indicators immediately within the span of control of the Alliance and that this could possibly be done through the accountability mechanism of the Gavi engagement framework.

- The Secretariat clarified that the disease dashboard does not have targets and that the intent is to monitor trends over time and to show those in a disaggregated way.
- The Secretariat indicated that more work will be done in relation to explore how best to present the data which are collected, in order to make indicators as useful to the Board as possible.
- Board members were informed that the UN statistical commission is currently discussing the indicators for the Sustainable Development Goals (SDGs) and that immunisation coverage is not being retained at the moment as one of those. Great concern was expressed by the Board and in addition to a letter being sent on behalf of Alliance, country representatives were encouraged to work with their relevant national representatives to indicate strong support to the statistical commission for immunisation being included as an indicator.

### **Decision Nine**

The Gavi Alliance Board:

- a) **Approved** the indicators for the Gavi Strategy 2016-2020 recommended in Section B of Document 13 for inclusion in 'Aspiration 2020', the disease dashboard, including Option 2 as a measles indicator, and under each strategic goal other than indicators for strategic goal 2;
- b) **Requested** the Secretariat to present indicators for strategy goal 2, an additional indicator of healthy market dynamics and an additional indicator of institutional capacity for national decision-making, programme management and monitoring to the PPC in October 2015 for recommendation to the Board in December 2015;
- c) **Requested** the Secretariat to present targets for the indicators for each strategic goal to the PPC in October 2015 for recommendation to the Board in December 2015; and
- d) **Requested** the Secretariat to work with partners in advance of the October PPC to finalise details related to the definitions and measurement approaches for all indicators across the disease dashboard and strategic goals, and provide an updated indicator definition document for the PPC's information in October 2015.

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## **12. Cold Chain Equipment Optimisation Platform**

- 12.1 The CEO introduced this item by highlighting that it had come out of the Board-approved supply chain strategy. He indicated that cold chain is necessary but not sufficient for ensuring increased coverage and reaching the unreached. Gavi could possibly play a role in market shaping in this area.
- 12.2 Lauren Franzel, Senior Specialist, Demand Forecasting, presented information to the Board on the proposed Cold Chain Equipment (CCE) Optimisation Platform (Doc 12), highlighting the rationale for the platform and the proposed platform design including the maintenance approach to address underlying problems.

### *Discussion*

- Board members indicated support for this initiative, in particular as an investment targeted at one of the constraints in health systems which can impede the work of the Alliance.
- It was suggested that this is an area in which private sector partners could play a critical role and the Board noted that this is being explored.
- Board members noted the importance of ensuring that country specificities are taken into account when procuring cold chain equipment.
- Board members welcomed the inclusion of a focus on maintenance of the cold chain equipment as this is very often a challenge for countries.
- The importance of providing equipment and training at the sub-national levels was highlighted.
- Board members noted that there will be a report back to the PPC and to the Board in 2017 but it was requested that the Secretariat provide routine updates on the progress of implementation of the CCE Optimisation Platform.
- The Secretariat noted that the proposed initial investment of US\$ 50 million by Gavi is to launch the platform. The total estimated funding for the platform required for Gavi countries, excluding India, is estimated to be between US\$ 240 million and US\$ 310 million for five years.

### **Decision Ten**

The Gavi Alliance Board:

- a) **Approved** the creation of an innovative mechanism to strengthen country cold chain systems and advance the Alliance's Supply Chain Strategy and, ultimately, its coverage and equity goals (the "CCE platform"), the design of which is set out in Section 8 of Doc 15 to the PPC and includes a funding model tiered by country GNI level;
- b) **Noted** that an amount of US\$ 50 million (to be reassessed and potentially increased based on initial applications to the CCE platform) will be allocated from the resources pledged for 2016-2020 (which envisage funding for strategic initiatives to realise Gavi's new strategy) to launch the implementation of the CCE platform and fund the initial applications in 2016-2017 and **requested** the Secretariat to report back to the PPC and to the Board in 2017 on the implementation of the CCE platform.

*Shanelle Hall (UNICEF) recused herself and did not vote on Decision 10(b) above.*

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### **13. Country Programmes strategic issues**

- 13.1 Before handing over to the presenters on this item the Chair introduced a short film from UNICEF on access and equity.
- 13.2 Hind Khatib-Othman, Managing Director, Country Programmes; Jos Vandelaer, UNICEF; and Rudolf Eggers, WHO; gave a presentation to the Board on Alliance Partners' work in a number of areas (Doc 13), highlighting the main successes and challenges and the work being done in relation strategic goals 1, 2 and 3 of the current strategy. Ms Khatib-Othman also gave an update on the work of the Country Programmes team within the Gavi Secretariat.

#### *Discussion*

- Board members welcomed the presentation and the breadth of information in the paper. It was suggested that it could be useful at the next meeting of the Board to focus more on the main challenges so as to enable the Board to have a better understanding of the areas of concern. It was also suggested that a focus at the next Board meeting could be on the needs of graduating countries, what the bottlenecks are, what strategies are being put in place, and related issues. The Secretariat clarified that the approach for graduating countries which was developed in 2013 is being implemented but that for the time being, as there is a very small number of graduating countries, there are not many lessons learnt that can be reported on. It was suggested that a technical briefing session before the December 2015 Board meeting on the tools being used in this approach might be useful for Board members.
- Board members noted a suggestion from that World Bank that they would be willing to contribute to the country programmes update at the next Board meeting.
- The Secretariat indicated that dialogue with the Global Fund is ongoing in particular with regard to addressing fiduciary risks (e.g. in DRC and Nigeria there is one fiduciary agent who works for both organisations) and health systems strengthening. It has been agreed that there will be a harmonised monitoring and evaluation toolkit where there are common needs so as not to compel new indicators on countries. Dialogue also continues in relation to harmonising reporting and there is also coordination to ensure that there is no overlap in funding between the two organisations.
- One Board member suggested that if there are examples of countries where Gavi has helped to overcome lack of political will at the high level it might be useful to share how this was done so that other countries might have the opportunity to learn from those experiences.
- The importance of community dialogue was highlighted, in particular in the context of reaching the unreached. This might include dialogue with migrant communities and communities where there are language barriers. Very often those who are hardest to reach are those living in rural areas.

- Board members noted that delays in vaccine programme implementation are not always due to vaccine supply issues but sometimes are due to lack of country readiness.
- The Secretariat indicated that there is a list of CSO platforms and that it is clear in the terms of reference for country visits that local CSOs should be part of the discussions. Work is continuing to ensure that CSOs are included in Interagency Coordinating Committee (ICC) discussions both on the development of strategy and applications for Gavi support. It was indicated that it would be useful for CSOs at the country level to ensure that they are making themselves known to the UNICEF and WHO country offices as well as to the Secretariat to ensure that they are integrated into discussions.

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#### **14. Ebola vaccine and mitigation plan**

- 14.1 The CEO introduced this item (Doc 14), reminding the Board of the extent to which Gavi's engagement in the Ebola response is exceptional. It is an emergency intervention, for an unpredictable situation given the evolving nature of the epidemic. He also emphasised that it is not just about Ebola but also about other vaccine preventable diseases and the weakening of health systems that need to be addressed.
- 14.2 Richard Sezibera, Chair of the PPC, delivered comments on this item by pre-recorded video, reporting that the PPC, at its meeting on 4-6 May had received an update on Ebola, which highlighted in particular the progress which had been made by Gavi to help accelerate development and deployment of an Ebola vaccine, to provide a country-tailored and immediate support to restore routine immunisation programmes in the affected countries and to coordinate - in synergy with partners - support for long-term health systems recovery efforts. PPC members had agreed that there was an opportunity to have a wider discussion on whether or not the Alliance should engage in potential future disease outbreaks more generally and that there was a need to better understand where the Alliance funding could have the most impact. PPC members had also stated that there was a need for further thinking around the potential added value of Gavi in relation to the development of second generation vaccines in the context of the work being done on this by WHO.
- 14.3 Stefano Malvoti, Director, Vaccine Implementation, updated the Board on the outcomes of the discussions at the WHO Ebola summit of 11-12 May, outlined the four dimensions along which Gavi's support for Ebola spans, and provided some information on the evolution of the disease outbreak in the affected countries. He indicated that the procurement strategy and support to manufacturers will depend on the evolving perspectives for vaccine development and approval.

#### *Discussion*

- The Chair stated that the way in which the Secretariat and Partners had mobilised in this situation was impressive, in particular the way in which they have continually



followed up not only on the development of vaccines but also on the consequences of the weakening of the health systems.

- Board members noted that the Executive Committee is receiving regular updates on the work being carried out but has not yet taken any decisions on top of what the Board decided in December 2014. A continuous evaluation of needs is ongoing and the Executive Committee is being kept apprised.
- Board members were informed that in the current setting where vaccine efficacy cannot be demonstrated a number of manufacturers are exploring alternative licensure processes so as to ensure that similar epidemics can be avoided in the future.
- Board members noted that it is not just about getting a prequalified vaccine as soon as possible but ultimately securing the best vaccine possible.
- The Board member representing the vaccine industry from industrialised countries indicated that the constituency felt that a vaccine stockpile would be the right approach, and that clear indications on the need for a second generation vaccine are needed.
- Board members were informed that a lot of work had already taken place in relation to vaccine deployment and a strategy is being developed for SAGE to consider.
- It was highlighted that one of the main priorities now in the affected countries will be to work on restoring routine immunisation services.
- The Secretariat indicated that a number of subgroups have been set up by WHO (on which Gavi is an active partner) dealing with different aspects such as cold chain, monitoring and evaluation and social mobilisation.
- Concerns were raised about the current cold chain requirement for the candidate vaccines and it was indicated that manufacturers are performing stability tests at temperatures which would be comparable to those for other vaccines.
- Feedback from countries in relation to HSS indicates that at the moment there is a problem of absorption of funds rather than the need for additional funds.

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## **15. Financial forecast and programme funding request**

- 15.1 Barry Greene, Managing Director, Finance and Operations, presented an overview of expenditure estimates for the period 2011-2020, an overview of expected resources for that period, and the evolution of the forecast since the last Board meeting. He also reported on programme and business plan expenditure (Doc 15).

### *Discussion*

- Board members noted that the forecast included an allowance for further donor contributions, which is based on current overall contribution levels, in accordance with Gavi's Programme Funding Policy. Without making any assumptions about individual contribution amounts, this allowance reflects an expectation that some donors, who were either unable to pledge at the replenishment or could only pledge for part of the strategic period, and also new donors, would make new pledges at some point to support the 2016-2020 strategy.
- One Board member underlined that Gavi is in a comfortable budgetary situation in relation to some other organisations and that there is a great opportunity to make a real impact. This carries with it a great responsibility and it is one of the roles of the Board to ensure that the funding is being spent optimally to deliver on the mission and the increased focus on coverage and equity.
- In reply to a query from a Board member, the Secretariat clarified that the reduction in surplus for 2016-2020 in comparison to what had been presented to the AFC in May was due to subsequently updated information received from the World Bank in relation to anticipated proceeds from IFFIm, as noted at the AFC meeting.
- The Secretariat also clarified that the one of the criteria looked at by the Independent Review Committee (IRC) when reviewing country applications is sustainability going forward. The general policy has been to encourage vaccine uptake by countries but in the context of the new transition and co-financing policies there will be more attention paid to sustainability going forward when reviewing country applications.

### **Decision Eleven**

The Gavi Alliance Board:

#### **IRC recommendations for approval**

- a) **Approved** the recommendations of the March 2015 New Proposals IRC for new vaccine support to commence in 2015 for 9 request for support as detailed in Figures 6-8 of Doc 15. For countries in default of their co-financing commitments ("Defaulting Countries"), this approval is subject to them meeting their co-financing requirements.

#### **Budgets**

- b) **Endorsed** a net increase in programme budgets by US\$ 52.8 million for the period 2015-2019 to implement the IRC recommendations in (1). For Defaulting Countries this endorsement is subject to them meeting their co-financing commitments.

*These endorsements would constitute acknowledgement of such budget amounts but would not constitute a funding approval, decision, obligation or commitment of the Gavi Alliance or its contributors.*

- c) **Approved** a net increase of near-term programme liabilities (a sub-component of the endorsed programme budgets in (b) by US\$ 51.5 million for 2015-2016. For Defaulting Countries this endorsement is subject to them meeting their co-financing commitments.

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## **16. Internal auditor's report**

- 16.1 Simon Lamb, Managing Director, Audit and Investigations, provided the Board with a report on his activity (Doc 16). He provided an update on the re-organisation of the audit function within the Secretariat, on developments with regard to key activities and the results of the recently completed external quality assessment of the internal audit function.

### *Discussion*

- Board members were informed that the AFC had had an in-depth report from the Managing Director, Audit and Investigations, and was comfortable with the information provided.
- It was noted that a timetable for remediation of the recommendations identified in the external quality assessment is being developed and will be presented to the AFC in due course. It was also noted that programmatic audits which have been carried forward from 2014 will be outsourced and that it is expected that with the additional resources which are expected within the Secretariat shortly it will be possible to complete all of the activities planned for this year.
- Board members were urged not to underestimate the potentials for programmatic risk and that while a lot of progress has been made in relation to managing this risk, there is more work to be done as a broader Alliance.
- Board members agreed on the importance of having an internal audit function which complies with international standards and welcomed the learnings from the external quality assessment which will enable the functions to be enhanced. It was acknowledged that this assessment was carried out at a time when the audit function was severely under-resourced.

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## **17. Review of decisions**

- 17.1 Kevin A. Klock, Head of Governance and Assistant Secretary to the Board, reviewed and agreed the decisions with the Board.

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**18. Closing remarks and any other business**

- 18.1 After determining there was no further business, the meeting was brought to a close.

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Mr Dagfinn Høybråten  
Chair of the Board

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Mr Kevin A. Klock  
Assistant Secretary

## Attachment B

### Participants

#### Board Members

- Dagfinn Høybråten, Chair
- Flavia Bustreo, Vice Chair
- Khaga Raj Adhikari
- Joan Awunyo-Akaba
- Wayne Berson (Day One)
- Donal Brown
- Gunilla Carlsson
- Olivier Charmeil (Day One)
- Awa Marie Coll-Seck
- Mariam Diallo
- HRH the Infanta Cristina of Spain
- Maria Freire
- Geeta Rao Gupta (Day One)
- Orin Levine
- Yifei Li
- Adar Poonawalla
- Angela Santoni
- Seif Seleman Rashid
- David Sidwell
- Samba O. Sow (Alternate)
- Beate Stiro
- Stephen Zinser
- Seth Berkley (non-voting)

#### Board Members Elect

- Blair Exell
- William Roedy

#### Regrets

- Bahar Iddris Abu Garda
- Kesetebirhan Admasu
- Zulfiqar A. Bhutta
- Tim Evans
- Dorothée Kinde Gazard
- Bheri Ramsaran (Alternate)
- Richard Sezibera
- Andrei Usatii

#### Alternates Observing

- Shanelle Hall
- Juliman Fuad
- Javier Hernández Peña
- Marcus Koll
- Laura Laughlin
- Violaine Mitchell
- Sara Nicholls
- Jean-Marie Okwo-Bele\*
- Muhammad Ayub Sheikh
- Katherine Taylor
- Naveen Thacker
- Eksavang Vongvichit
- Wieneke Vullings

\* Served as the eligible organisation's voting member per Section 2.6.5 of the By-Laws

#### Alternate Board Members Elect

- Rama Lakshminarayanan

### Additional Attendees

#### IFFIm

Dr René Karsenti, IFFIm Board Chair  
 Mr Cyrus Ardalan, Vice Chairman, Head of UK & EU Government Relations, Barclay's  
 Mr Marcus Fedder, IFFIm Director  
 Ms Fatimatou Diop, Vice President, AFRIVAC  
 Mr Christopher (Edge) Egerton-Warburton, Co-founder, Lion's Head Global Partners

#### WORLD HEALTH ORGANIZATION

Dr Francisco Becerra, Assistant Director, PAHO  
 Dr Rudolph Eggers

#### UNICEF

Dr Jos Vandelaer, Chief, Immunization  
 Dr Heather Deehan, Chief, Vaccine Centre  
 Dr Doreen Mulenga, Deputy Director, Supply Program

**BILL & MELINDA GATES FOUNDATION**

Kathleen Goodman, Deputy Director for Strategy Planning & Management  
Ms Nicole Bates, Deputy Director  
Ms Amrita Palriwala, Program Officer, Results for Development Institute

**THE WORLD BANK**

Mr Robert Oelrichs, Senior Health Specialist  
Mr Francois Lefebvre, Senior Financial Officer

**DEVELOPING COUNTRY GOVERNMENTS**

**Lao PDR**

Dr Soulivanh Pholsena, Secretary to Minister of Health

**Tanzania**

Dr Catherine Sanga, Permanent Mission of Tanzania to the UN  
Mr Martin Elias, Ministry of Health, Tanzania

**DONOR GOVERNMENTS**

**Australia**

Ms Sue Elliott, Permanent Mission to the UN, Geneva  
Ms Susan Graves, Director, Sectoral Funds Section, DFAT  
Mr Richard Wade, DFAT  
Mr Tim Poletti, Permanent Mission to the UN, Geneva

**Canada**

Ms Catherine Palmier, Counsellor, Canada Permanent Mission to the UN, Geneva

**European Commission**

Mr Jan Paehler, Team Leader, Global Health Initiatives

**France**

Ms Ariane Lathuille, DGM/DBM/SAH, MoFA

**Germany**

Mr Hendrik Schmitz Guinote, Permanent Mission to the UN, Geneva

**Italy**

Mr Alberto Bertoni, First Counsellor for Health, Permanent Mission to the UN

**Luxembourg**

Ms Natasha Gomes, Adviser, Global Health and Multilateral Affairs, Ministry of Foreign Affairs

**Norway**

Ms Lene Lothe, Head of Health Section, NORAD  
Ms Mari Grepstad, Adviser, NORAD

**Oman**

Ambassador Abdulla Nasser Al Rahbi, Ambassador and Permanent Representative, Geneva

**Qatar**

Dr Mohammed Mohammed Al-Hajri, Director of Emergency Preparedness and Response Department, Assistant Secretary General of Health Affairs Office  
Ms Raga Naseem Hammad, Public Health Consultant, Permanent Mission to the UN

**Sweden**

Ms Kerstin Von Hedenberg, Deputy Director, MoFA  
Ms Catharina Cappelin, Counsellor, Permanent Mission to the UN  
Ms Katarina Martholm Fried, Counsellor, Permanent Mission to the UN  
Ms Clara Luthman, Permanent Mission to the UN

#### **United Kingdom**

Mr Jason Lane, Senior Health Adviser, DFID  
Ms Hannah Langfield, Deputy Programme Manager, Gavi, IFFIm and AMC, DFID  
Ms Ruth Turner, Programme and Policy Officer, Permanent Mission to the UN, Geneva  
Mr Nicholas Wintle, Economist, DFID

#### **United States of America**

Ms Susan McKinney, Senior Technical Advisor for Immunization, USAID  
Ms Gena Hill, Associate Director of Policy, CDC

#### **VACCINE INDUSTRY - DEVELOPING COUNTRY**

Dr Suresh Jadhav, Executive Director, Serum Institute of India

#### **VACCINE INDUSTRY - INDUSTRIALISED COUNTRY**

Dr Laetitia Bigger, Senior Manager, Vaccines Policy, IFPMA  
Dr Lindsey Dietschi, Senior Director, Corporate Affairs, Pfizer  
Dr Corinne Bardone, Senior Director, Vaccination Policy, Sanofi Pasteur  
Dr Logan Rae, Senior Director Government Affairs, Takeda Pharmaceuticals  
Dr Corry Jacobs, Director Global Policy and Research GSK Vaccines  
Dr Joan Benson, Executive Director, Merck  
Dr Olga Popova, VP Global Vaccine Policy & Partnerships, Crucell Holland B.V.  
Dr Guy Pickles, Vaccines Policy Associate, GSK

#### **RESEARCH AND TECHNICAL HEALTH INSTITUTES**

Dr Alex Adjagba, Deputy Director, SIVAC Initiative, Agence de Medecine Preventive, Paris  
Dr Alfred Da Silva, Executive Director, Agence de Medecine Preventive (AMP)  
Ms Nadia Khelef, Senior Global Affairs Advisor to the DG, Institut Pasteur Representative in Geneva

#### **CIVIL SOCIETY ORGANISATIONS**

Dr Ayo Ipinmoye, ACOMIN, Nigeria  
Dr Dure Samin Akram, HELP, Pakistan  
Dr Patrick Bertrand, Executive Director, Global Health Advocates, France  
Ms Amy Dietterich, Coordinator/Communications Focal Point, GAVI CSO Constituency, IFRC

#### **Special Advisers**

Ms Cristina Gaberi, Special Adviser to the Board Member from Moldova  
Ms Lidija Kamara, Special Adviser to the Gavi Alliance Board Vice Chair  
Mr Aksel Jakobsen, Special Adviser to the Gavi Alliance Board Chair  
Mr Stephen Karengera, Special Adviser to the Chair of the PPC  
Ms Sokhna Mbow Diba, Special Adviser to the Board Member from Senegal  
Ms Coline Mahende, Special Adviser to the Board Member from Tanzania  
Ms Eunice Peregrino Dartey, Special Adviser to the Board Member for CSOs  
Ms Carol Piot, Special Adviser to the Chair of the IFFIm Board  
Ms Silvia Noguera Figuerol, Special Adviser to HRH Cristina Infanta of Spain  
Dr Krishna Prasad Paudel, Special Adviser to the Board Member from Nepal  
Dr Sara Mohammed Osman Elias, Special Adviser to Board Member from Sudan

#### **Other Observers**

Dr Rob Moodie, Chair, Gavi Evaluation Advisory Committee  
Dr Felix Masiye, Head of the Department of Economics, University of Zambia  
Ambassador John Lange, Senior Fellow, Global Health Diplomacy, UN Foundation  
Dr Stephen Lim, Associate Professor, Department of Public Health, University of Washington  
Mr Daniel Miller, VAD Associate Director, PATH, Geneva