

*GAVI Alliance*

**Application Form for Country Proposals**

***Response to conditions***

*For Support to New and Under-Used Vaccines (NVS)*

Submitted by

The Government of

***Sierra Leone***

**Deadline for submission: 15 November 2011**

Select Start and End Year of your Comprehensive Multi-Year Plan (cMYP)

|  |  |  |  |
| --- | --- | --- | --- |
| Start Year | 2012 | End Year | 2016 |

**Revised in January 2011**

**(To be used with Guidelines of December 2010)**

Please submit the Proposal using the online platform [https://AppsPortal.gavialliance.org/PDExtranet](https://appsportal.gavialliance.org/PDExtranet).

Enquiries to: proposals@gavialliance.org or representatives of a GAVI partner agency. The documents can be shared with GAVI partners, collaborators and general public. The Proposal and attachments must be submitted in English, French, Spanish, or Russian.

**Note:** Please ensure that the application has been received by the GAVI Secretariat on or before the day of the deadline.

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.

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| **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 IRC processes and the availability of funds.**AMENDMENT TO THE APPLICATION**The Country will notify the GAVI Alliance in its Annual Progress Report 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 Annual Progress Report, 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 language of the arbitration will be English.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. |

# **Response to conditions**

**Vaccine: Rotavirus 2-dose schedule**

**Condition 1:**

Sierra Leone is requested to provide an ICC-endorsed communication that adequate and functional cold chain has been put in place at all levels prior to shipment of new vaccines.

A cold chain assessment conducted in 2010 predicted a gap of 5094 Liters at national and 6896 Liters at district level with the introduction of rotavirus vaccine. Cold chain quality is vital in ensuring that safe and potent vaccines are given to children. The potency of vaccines should be maintained and this requires vaccines to be stored in and distributed through a functioning and effective cold chain system.

The country has developed a cold chain plan to address the identified gaps and sustainability of the effective cold chain (refer cold chain plan for Sierra Leone). Based on recommendations to increase capacity for new vaccines at the national and district store levels, the following will be put in place by first quarter of 2012 before introduction (see attached PGM for procurement):

* One additional 40m3 walk-in-cold room at the national level
* 26 -Surechill AC refrigerators Model: BLF100AC (WHO PQS Ref: E003/013) at district level
* 26 –Surechill (100 litres) battery-less solar refrigerators at district level
* 40 Solarchill (25 litres) battery-less solar refrigerators Model: MKS044 (WHO PQS Ref: E003/009) at PHU level

To ensure that the new freeze sensitive vaccines are safe, fridge tags have been introduced in the cold chain monitoring system at all levels and the use of cold water packs (instead of ice packs) to ensure storage between +20C to +80C is being emphasized; This and shake test will be incorporated in the immunization in practice training for staff in the last quarter of 2011.

Similarly, refresher training and preventive maintenance plans for cold chain technicians at the district and PHU levels and procurement of spare parts are all incorporated in the plan to ensure a sustained functional cold chain.

The switch to Rotarix will create excess cold chain capacity for future additional vaccines.

There was a formal presentation to the Health Sector Steering Group (HSSG), which now replaces the ICC. Recommendations and next steps/action points made during the meeting were as follows.

**RECOMMENDATIONS**

* Endorse Cold Chain Plan 2012- 2016 (GAVI Condition)
* Mobilise adequate resources for the introduction of Rotavirus Vaccine
* Explore the possibilities of additional funding sources (local/ external Partnerships)
* Provide appropriate immunization waste management facilities
* Create better visibility for EPI through high level advocacy
* Strengthen data management within the MOHS in general
* Provide adequate support for supportive supervision

**NEXT STEPS/ ACTION POINTS**

* Recommendations approved by the HSSG
* Partners to support cold chain plan and mobilize resources for introduction of rotavirus vaccine in 2012.

**Condition 2:**

Sierra Leone is requested to provide revised targets for rotavirus vaccine coverage so that they are more gradual and realistic, and revise budget, number of doses required, injection equipment, and co-financing payments accordingly.

With respect to the coverage rates for rotavirus vaccine, our consideration was based on the premise that vaccines given at the same time to the same cohort should maintain the same coverage. However, we do recognize the fact that in the first year of introduction it may not be necessarily so. Therefore the technical coordinating committee has revised the coverage rate to 80% in the year of introduction taking into account that the WHO/UNICEF estimates for penta-3 in 2010 is 90%. We have noted that PCV which was introduced in January 2011 did not achieve the same momentum as penta vaccine. Lessons learnt from this experience which includes inadequate awareness and training of service providers, poor monitoring and distribution of vaccines to health facilities in the first few months of introduction will be addressed to ensure smooth introduction of the rotavirus vaccine. Similarly, based on additional information technical and operational considerations (lessons from PAHO countries, higher coverage with two compared to three doses, and storage space), the country has decided to change from Rotateq (with 3 doses) to Rotarix (with 2 doses). As a result of the change in coverage estimate and vaccine type, budgets, vaccine doses required and co-financing payments have been revised accordingly.

These changes are reflected in the cMYP accordingly.

# **Signatures of the Government**

Enter the family name in capital letters.

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

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

Enter the family name in capital letters.

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