

## FOR INFORMATION

The Programme and Policy Committee (PPC) of the GAVI Alliance Board has held five meetings since the June 2009 board meeting. This paper provides a brief summary of issues discussed.

The Board will be requested to approve the PPC's recommendations with regard to eligibility and graduation, donations and health systems strengthening.

### Programme and Policy Committee Update June – November 2009

#### Introduction

The Programme & Policy Committee (PPC) serves as the principal advisory body to the board on all GAVI programme areas and leads the development of new policies. It is staffed by high-level technical experts from partner organisations and constituencies, with knowledge in areas such as epidemiology, public health, research, health systems and financing. The Committee is chaired by Sissel Hodne Steen and has held two face-to-face meetings and three teleconference since June. The Committee reviewed the charter and agreed to working procedures. Actions taken by the PPC and key discussion items from all three meetings are summarised below.

#### Actions taken

**Work plan:** the PPC approved disbursement of 2010 funding for UNICEF and WHO activities presented (\$11,072,360 of which \$7,969,360 for WHO and \$3,103,000 for UNICEF).

**Eligibility policy:** the PPC endorsed the Eligibility Policy, to be presented to the board in November 2009.

**Graduation procedures:** the PPC endorsed the Graduation procedures, to be presented to the board in November 2009.

**Donation policy:** the PPC endorsed the Donation policy, to be presented to the board in November 2009.

**Health systems strengthening:** the PPC endorsed recommendations for HSS, to be presented to the board in November 2009.

#### Key issues discussed

Below is a summary of issues discussed.<sup>1</sup>

**June Board meeting review:** At their meeting in June, the PPC reviewed the outcomes of the June board, in particular with regard to resource mobilisation efforts,

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<sup>1</sup> Full PPC meeting minutes are available: <http://www.gavialliance.org/about/governance/boards/committees/index.php>

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developing the GAVI Alliance Strategy, and implementation of a new conflict of interest policy. With regard to Strategy, the EC will recommend to the Board that it guide this effort on behalf of the board.

**Eligibility:** At the meeting in June, the PPC's eligibility task team raised a number of key questions with the full committee steer policy development. Among other issues, the PPC recommended to the task that that:

- The primary driver of eligibility should be a focus on the poorest countries rather than poor populations within middle income or other countries.
- Eligibility be decoupled from resource allocation
- Graduation criteria should be made explicit
- Although issues related to the co-financing policy may surface when eligibility criteria are assessed in 2010, this should not delay recommendations by the PPC with regard to changing the eligibility criteria.

**HSS:** At the June PPC meeting it was agreed that the Secretariat would be guided by the PPC to develop recommendations for the Board on a joint HSS platform with the Global Fund to fight AIDS, TB and Malaria (GFATM) and World Bank, through additional virtual meetings. A concrete work plan and deliverables for the Secretariat was developed and agreed by the PPC and nine HSS Special Advisers<sup>2</sup> were selected to provide specialised input into the process<sup>3</sup>. In addition to the Secretariat meetings with the PPC chair and Special Advisers three times, the PPC also met three times over the summer to review the progress of the Secretariat and helped shape the design of the different iterations of the Board paper.

Key issues raised included links with ongoing IHP+ processes, the Monitoring & Evaluation Framework, performance based financing, comparative advantage of the 3 agencies and the future of HSS with a GAVI mandate. The issues and alternatives outlined in the final paper are jointly being presented to the GAVI and GFATM November boards.

**Workplan:** The committee reviewed the status of the 26 activities being conducted by UNICEF and WHO for which the board had delegated to the PPC decision making authority for 2010 funding. The PPC members were satisfied with the level of reporting, including the justifications for delays in progress on certain activities. However, of note, per the decision earlier in the year, the PPC agreed that the work plan and planning process should be reviewed within the context of the new strategic and business plan.

**Vaccine investments strategy implementation plan:** The committee reviewed proposed next steps with regard to the vaccine investment strategy endorsed by the board in November 2009 and recommend that the secretariat, through the AVI platform, move forward with the development of country applications guideline for

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<sup>2</sup> Dr Claude Sekabaraga (World Bank, Nairobi), Dr Lola Dare (ACOSHED), Dr Salif Samake (Ministry of Health, Mali), Dr Kakar (Deputy Minister of Health, Afghanistan), Dan Kress (Bill and Melinda Gates Foundation), Bob Emery (USAID), Julia Watson (DFID), Francesca Boldrini (Novartis), Ian Pett (UNICEF)

<sup>3</sup> Before every PPC meeting there was a Special Advisers call (Three in total) which involved the Chair and the Secretariat only. Two Special Advisers briefed the PPC at the start of every PPC call. In addition two special advisers were invited to the PPC face to face meeting in October (Lola Dare, Francesca Boldrini)

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HPV, JE, rubella and convene an expert group to consider potential strategies for typhoid.

**Prioritisation:** the PPC gave guidance to the Secretariat on its proposed prioritisation principles should resources be limited. They agreed that existing commitments are firm and that GAVI must stand behind the legally binding and “moral” commitments already made to currently eligible countries to support their programs through 2015. This includes completing the introduction of HiB. The focus should be around new applications. They asked the Secretariat to develop an approach for prioritisation that encompasses both prioritisation by vaccine and prioritisation by country for newly recommended applications.

**Self assessment and related issues:** the PPC discussed the results of a self-assessment exercises which had been facilitated by the consulting group, Egon Zender, which will also be presented to the November board during the discussion on Governance. As a follow up, the committee also reviewed its charter, operating procedures and discussed duties. They agreed that moving forward, and in line with their charter, country support updates needed to be regularly scheduled, as do a review of any IRC policy recommendations.