

GAVI Alliance Board Meeting

20 April 2010

Teleconference

FINAL Minutes¹

Finding a quorum of members present², the meeting commenced at 16.07 Geneva time on 20 April 2010. Mary Robinson chaired the meeting and extended a special word of appreciation to Dagfinn Høybråten and Paul Fife for their efforts in organising the board retreat in Oslo which had to be postponed.

1 Health Systems Funding Platform and Programme Funding Plan – Nepal HSS

Gustavo Gonzalez-Canali, Programme and Policy Committee (PPC) Chair noted the Board requested the PPC to report on plans to operationalise, pilot, and monitor a potential Health Systems Funding Platform (HSFP)³ and so described the collaborative work performed with the World Bank and the Global Fund to fight AIDS, TB, and Malaria (Global Fund) along with WHO on the platform (Doc #5 in the board pack). Carole Presern, Managing Director, Special Projects also offered insights on the process, noting that the HSFP project had benefitted from consultations at the international, country and civil society levels. Finally, Barry Greene, Managing Director, Finance and Operations, explained the financial implications of an expedited request to approve a health systems programme in Nepal which could serve as a pilot for the platform (Doc #6). Discussion ensued:

- The Board noted that implementing the platform would demonstrate the harmonisation principles of the Paris and Accra accords.⁴ Still, there is a need to eventually assess vaccine-related results and the platform's impact on the MDGs.
- Because the Global Fund's funding cycle is markedly different from GAVI's, it may not be able to contribute financially to the platform until 2011. However, it can still participate with the application process and its board will consider approving the platform in the near future.
- There are two ways of moving this programme forward: Track 1 involves harmonising existing investments to ensure better health outcomes, whilst Track 2 involves new funding. Planning for these options involves developing links with key stakeholders, including civil society, to maximise comparative advantages and minimise comparative disadvantages between agencies and stakeholders.

¹ Binding Resolutions approved by the GAVI Alliance Board are listed in Attachment A. Decisions within the text of the minutes are non-binding, "plain English" actions agreed by the Board.

² Attendees are listed in Attachment A.

³ See Section 13 of the 17-18 November 2010 Minutes

⁴ <http://www.oecd.org/dataoecd/11/41/34428351.pdf> - retrieved May 2010

- The performance indicators and measurement requirements set by funding agencies places a burden on countries. The platform must work within existing frameworks and must not create additional burdens for recipients.
- Though GAVI, the Global Fund, and the World Bank are making significant investments in the platform, the involvement of bilateral agencies is also crucial to its success. Thus a discussion on the division of labour should be considered, including resource implications for the Secretariat.
- The Board was keen to support the platform but would like updates as implementation progresses, particularly regarding Track 2. Specific suggestions for the platform include:
 - Continuing the emphasis on effective communications and timely evaluation
 - Respecting country ownership
 - Track 2, Option 1⁵ should target countries with no short term prospect of developing a compact from the International Health Partnership (IHP+)⁶
 - Track 2, Option 2⁷ should target countries that sign up to IHP+ and include a description as to the role of in-country GAVI partners for providing technical assistance
 - To analyse the impact of funding through Track 2, Option 2 (funding against national plans/strategies), a description of how this new funding stream will interplay with others, especially those from the World Bank should be undertaken
- The Nepal proposal represents a worthwhile opportunity to put the platform into operation immediately. The Audit and Finance Committee acknowledged that it reviewed the financial implications of the HSS budget and financial commitment for Nepal and was comfortable on that basis to move forward; noting that the programme was affordable and its approval would not meaningfully hinder the prioritisation exercise. Also, the Committee noted that in the future, it desired additional information to understand in a comprehensive sense the ultimate impact of funding decisions, particularly in a resource-constrained environment.
- The Board recognised the special circumstances associated with the Nepal programme that made it both a viable candidate for the platform and worth consideration outside the prioritisation exercise.

DECISION

The GAVI Alliance Board:

- 1.1. **Affirmed** the critical importance of strong health systems to achieve GAVI's mandate and endorsed health systems support which focuses on service delivery bottlenecks, and which

⁵ New funding via a joint GAVI and Global Fund health systems proposal

⁶ <http://www.internationalhealthpartnership.net> – retrieved May 2010

⁷ New funding for health systems based on national health plans

seeks to achieve outcomes for MDGs 4 (particularly immunisation-related outcomes), 5 and 6.⁸

- 1.2. Requested the Secretariat continue work with the Global Fund, the World Bank, WHO and others partners (bilateral agencies, other UN agencies, civil society organisations, private sector, etc) on Track 1 - harmonisation of existing investments to ensure better health outcomes (including immunisation-related), and better value for money.
- 1.3. Requested the Secretariat continue, based on consultations at country level, to work on the implementation of Track 2 Option 1 through the development of a joint proposal form with the Global Fund. The joint proposal form would be approved by the Programme and Policy Committee, for use as soon as possible. Any funding proposals using this new joint proposal form would be subject to IRC review and Board-approval processes.
- 1.4. Requested continued work on Track 2 Option 2 - funding based on national plans, such that 4-5 countries could be approved by the Board, and start implementation in 2010. There will be a focus on lesson learning, partner engagement, results, and mechanisms for building health systems capacity at country level as part of the implementation (taking account of evaluation findings).
- 1.5. Requested the Secretariat increase dialogue with partners, and develop a communications strategy with the Global Fund, the World Bank and others.
- 1.6. Requested GAVI work with the Global Fund and other partners in the lead-up to the 2012 evaluation of the Health Systems Strengthening programme, to ensure there is an independent evaluation of the Health Systems Funding Platform.
- 1.7. Endorsed a new three-year HSS budget for Nepal in the amount of US\$ 14,540,690 as within the scope of the GAVI Alliance's charitable mission.
- 1.8. Approved a near-term financial commitment for Nepal HSS in the amount of US\$ 4,656,945.

⁸ <http://www.un.org/millenniumgoals/>

2 Appointment of Alternate Board Members

At its meeting on 19 April 2010, the Governance Committee requested the Board to appoint the candidates it had nominated as alternate board members. There was no discussion.

DECISION

The GAVI Alliance Board:

- 2.1 Appointed the following candidates for Representative Board Member seats:
 - 2.1.1 **Nora Del Transito Orozco Chamorro** as Alternate Board Member to Minister Guillermo González González representing Developing Country Governments effective immediately and until 31 December 2012
 - 2.1.2 **Annie Vestjens** as Alternate Board Member to Anders Molin representing Donor Country Governments effective immediately and until 31 December 2011

3 Update on the Board Retreat

The Board acknowledged that the retreat originally scheduled for 19-20 April 2010 in Oslo had been tentatively rescheduled for 11-12 May 2010 in Geneva.

There being no further business, the meeting was adjourned.

Mr. Kevin Klock, Assistant Secretary

Resolutions approved by the GAVI Alliance Board (Attachment A)

RESOLUTION ONE

1. Multi-year Programme Budget

The GAVI Alliance Board:

Endorsed the following multi-year programme budget as within the scope of the GAVI Alliance's charitable mission:

- **US\$ 14,540,690** for a Health Systems Strengthening programme in Nepal.

This endorsement constitutes acknowledgement of the amount contained in such budget but does not constitute a funding approval, decision, obligation or commitment of the GAVI Alliance or its contributors.

RESOLUTION TWO

2. Programme Financial Commitment

The GAVI Alliance Board:

Approved a financial commitment on behalf of the GAVI Alliance to fund the following:

- **US\$ 4,656,945** for a Health System Strengthening programme in Nepal.

RESOLUTION THREE

3. Alternate Board Member Appointments

The GAVI Alliance Board:

Appointed the following alternate board members for the terms listed below:

- Nora Del Transito Orozco Chamorro as Alternate Board Member to Minister Guillermo González González representing Developing Country Governments effective immediately and until 31 December 2012
- Annie Vestjens as Alternate Board Member to Anders Molin representing Donor Country Governments effective immediately and until 31 December 2011

Participants (Attachment B)

Board Members

- Mary Robinson, Chair
- Jaime Sepulveda, Vice Chair
- Wayne Berson
- Paul Fife
- Gustavo Gonzalez-Canali
- Magid Al-Gunaid (Alternate)
- Nguyen Tran Hien (Alternate)
- Alan Hinman (Alternate)
- Saad Houry
- Dagfinn Høybråten
- Fidel Lopez-Alvarez
- Daisy Mafubelu
- Anders Molin
- Anne Schuchat
- Julian Schweitzer
- Richard Sezibera
- Gloria Steele
- George W. Wellde, Jr.
- Julian Lob-Levyt (non-voting)

Regrets

- Dwight Bush
- Ashutosh Garg
- Guillermo González-González
- Jean Stéphenne

GAVI Secretariat

- Helen Evans
- Barry Greene
- Kevin Klock
- Stephen Nurse-Findlay
- Carole Presern

Guest

- Claire Mahon, Special Advisor to Mary Robinson