GUIDELINES ON REPORTING AND RENEWAL OF GAVI SUPPORT

Gavi
The Vaccine Alliance

Reach Every Child
www.gavi.org

March 2017

Guidelines on Reporting and Renewal of Gavi support

Executive summary **4**
1. Introduction **5**
2. Reporting **6**
2.1. Grant performance framework (GPF) reporting 8
2.2. Financial reporting 9
2.3. Stock reporting 10
2.4. Campaign reporting 10
2.5. Immunisation financing and expenditure information 11
2.6. General programme and country reporting 11
Data quality 11
Effective Vaccine Management (EVM) 12
Post introduction evaluation (PIE) 12
Expanded programme on immunisation (EPI) 12
Measles-rubella EPI plan 12
Health system strengthening reports 13
Human papillomavirus vaccine (HPV) demonstration programme reporting 13
2.7. Particular circumstances 14
Reporting in the case of pooled funding 14
Reporting for self-procuring countries 14
Transition plan 14
3. Renewal **15**
3.1. Renewal and/or extension of vaccine support 16
Overview 16
Extension requests 17
Renewal of phased campaign support 17
Changes to introduction and/or coverage plans 17
Product or presentation switch 18
3.2. Renewal of health system strengthening support 19
Overview 19
Performance payment 19

2 Chemin des Mines
1202 Geneva . Switzerland
Tel. + 41 22 909 65 00
Fax + 41 22 909 65 50
www.gavi.org
info@gavi.org

Budget reallocations and reprogramming....20
No-cost extensions and grant closure....21
3.3. Renewal of cold chain equipment optimisation platform support....21
3.4. Joint Appraisal....21
Overview....21
Differentiation options....23
Preparation of the Joint Appraisal and pre-Joint Appraisal data analysis....25
Joint Appraisal report....25
3.5. Renewal decision....26
Annexes....27
Annex A - Considerations for deciding the timing of the Joint Appraisal....27
Annex B - Joint Appraisal analysis guidance....28

2 Chemin des Mines
1202 Geneva . Switzerland
Tel. + 41 22 909 65 00
Fax + 41 22 909 65 50
www.gavi.org
info@gavi.org

Executive summary

Gavi typically approves its funding for new and underused vaccine support (NVS), health system strengthening (HSS) and cold chain equipment optimisation platform (CCEOP) support covering a three to five year period, aligned with the duration of the comprehensive multi-year plan for immunisation (cMYP) or the national health plan, and subject to an annual performance assessment and renewal decision. In Gavi terms, "renewal" describes the process in which Gavi reviews the progress and performance of its past support to a country, and determines the vaccines to be provided and funds available for disbursement for the next period.

These guidelines are intended to provide to countries an overview of the reporting requirements for Gavi support, as well as a description of the annual performance assessment and renewal process.

Gavi reporting requirements and cycles vary depending on the type of support a country is receiving, as well as its fiscal year.

- Key reporting requirements include the update of the grant performance framework (GPF), financial reports and end of year stock level reporting, which are all essential for the annual renewal of support.
- Other critical reporting can either be support-specific, such as campaign reports or human papillomavirus vaccine (HPV) demonstration reports, or relate to the sharing of general programme and country information, such as immunisation financing and expenditure information, data quality information and progress updates on Effective vaccine management (EVM) or expanded programme on immunisation (EPI) improvement plans.

Gavi renewal requirements

Gavi renews its support annually, subject to an annual performance assessment. The renewal process thus entails the review of the implementation progress and performance, and the contribution to improved immunisation outcomes, of past Gavi's support to the country, as well as planned Gavi support for the next period, with a vision to enhance its impact in line with Gavi's mission and strategy.

The renewal process can be broken down into the following key steps:

- By 15 May each country submits a renewal request for new and underused vaccine support (NVS) and the end-of year stock reports; through the subsequent review of this information by Gavi a country's vaccine allocation is determined.
- At a date agreed between the country and Gavi, the country submits a renewal request for health system strengthening (HSS) support and cold chain equipment optimisation platform (CCEOP) support, and ensures that all required reporting has been provided.
- Four weeks later, a Joint Appraisal is conducted, discussing past performance and key actions to enhance the impact of Gavi support.

A dedicated Gavi panel will subsequently review the information provided from the country, including the vaccine allocation and Joint Appraisal report, and makes a renewal recommendation. The renewal decision is formalized through a Decision Letter, which allows the shipment of vaccines and disbursements.

1. Introduction

Gavi's mission is to save children's lives and protect people's health by increasing equitable use of vaccines in lower-income countries.

New and underused vaccine support (NVS), health system strengthening (HSS) and cold chain equipment optimisation platform (CCEOP) support is generally approved by Gavi for the duration of the national health plan or comprehensive multi-year plan for immunisation (cMYP). This usually corresponds to a three to five year period, subject to an annual performance assessment and renewal decision.

These guidelines are intended to provide guidance to countries on the performance assessment and renewal decision by providing an overview of the reporting requirements for Gavi support, as well as a description of the annual performance review and renewal process.

During grant implementation, countries are expected to regularly report to Gavi on the progress and performance of Gavi support (**reporting**).

As part of the ongoing grant cycle, countries annually request the continuation of Gavi support, and based on the reported progress and renewal request, Gavi reviews and renews its support to the country (**renewal**).

The **Joint Appraisal** is a key element of the annual performance review and renewal process. It is an annual, country-led, multi-stakeholder review of the implementation progress and performance of Gavi's support to the country, and its contribution to improved immunisation outcomes. The outcomes of the Joint Appraisal serve to inform the renewal of Gavi support for a further year. The Joint Appraisal also informs the focus of technical assistance provided by Gavi Alliance partners.

If a country's vaccine support is coming to an end and the country is still eligible for Gavi support, it may submit a request to extend the support (**extension**) which is processed as part of the annual vaccine support renewal.[1]

Gavi has a dedicated **Country Portal** for countries to provide reports and renewal requests (https://portal.gavi.org/). The Country Portal is structured into three sections: Apply - Report - Renew. All reporting and renewal related documentation is expected to be submitted through the Country Portal.

[1] The process for health system strengthening support is notably different, as it requires a country to submit a new request for support when the grant is coming to an end and the countries wishes further support from Gavi. For further information on this, please refer to the Gavi website or contact your Gavi Senior Country Manager.

2. Reporting

During grant implementation, countries are expected to regularly report to Gavi. The Gavi Secretariat collates the information provided by countries alongside data that it gathers from existing sources, such as the WHO-UNICEF Joint Reporting Forms (JRF). The country-reported data and the Gavi-gathered data are used together to monitor progress and performance of Gavi support.

Gavi supports aid effectiveness principles, and aims to contribute to the strengthening of country systems and minimise the reporting burden for countries. As such, many of Gavi's reporting requirements build upon aspects that countries already monitor to ensure effective immunisation and health systems (e.g. effective vaccine management (EVM) assessments, immunisation data quality assessments). Further, Gavi directly accesses data from publicly available sources, where possible, such as the WHO-UNICEF Joint Reporting Forms (JRF), and uses standard indicator definitions and reporting formats. In addition, there are some Gavi-specific reporting requirements that aim to measure appropriate use of its grants and their results.

Accordingly, Gavi makes a distinction between:
- Gavi-specific reporting requirements
- Programme reporting routinely carried out by countries within their own systems.

The exact reporting requirements and timelines vary depending on the type of support a country is receiving as well as its fiscal and other cycles.

Reports need to be prepared in accordance with the terms set out in the Partnership Framework Agreement signed between Gavi and a country, and as may have been amended in any subsequent addendum.[2] When a new proposal or renewal request for funding is approved, a Decision Letter confirms the decision and the terms and conditions of the support, such as grant length, budget and activities being funded.

There are two main types of reporting undertaken by a country:[3]
- Programmatic reporting, i.e. reporting related to the activities and results of the Gavi-supported programmes in countries; and
- Financial reporting, which includes reporting against all forms of direct financial support provided by Gavi to countries (including health system strengthening (HSS) grants, vaccine introduction grants (VIGs), operational support for campaigns, human papillomavirus vaccine (HPV) demonstration grants, product switch grants, etc.).

Countries are encouraged to share with Gavi any additional documents, reviews and assessments that may support a more comprehensive understanding and assessment of a country's immunisation and health system performance.

The following required reports are essential for the renewal of existing support:
- Update of the grant performance framework (GPF) for indicators which are due (for all support)
- Periodic financial reports, annual financial statements and audit reports (for all types of direct financial support received)

[2] The Partnership Framework Agreement is explained in the General Guidelines for Applications for all types of Gavi support, available here: http://www.gavi.org/support/process/apply/

[3] The Partners' Engagement Framework reporting is the responsibility of the partners under Ministry of Health oversight.

- End of year stock reporting (for vaccine support; this information is compulsory to be submitted by 15 May of each year to calculate future vaccine requirements)

Other critical reporting information include:

- Campaign reports (if applicable)
- Immunisation financing and expenditure information
- Data quality information (including annual desk review and progress report on the implementation of immunisation data quality improvement plans)
- Annual progress update on the effective vaccine management (EVM) improvement plan
- Human papillomavirus vaccine specific reporting (if applicable)
- HSS end of grant evaluation (if applicable)
- Post introduction evaluation (PIE) reports (if applicable)
- Expanded programme on immunisation (EPI) reviews (if applicable)
- Transition plan (if applicable)

All reporting is expected to be submitted through the Country Portal (https://portal.gavi.org/).

Previously provided reports (e.g. in the case of multi-year plans) are not required to be resubmitted.

The following pages provide an overview on standard reporting requirements.

2.1. Grant performance framework (GPF) reporting

For detailed information on the grant performance framework, including guidance documents and tutorials, refer to the Gavi website: www.gavi.org/support/performance-frameworks/

Reporting on the grant performance framework is due as per an agreed reporting schedule. **It is particularly important to ensure that the grant performance framework is up to date, for all indicators due at the time, four weeks before the annual Joint Appraisal takes place**.

Gavi's performance framework is an upfront agreement between a country and Gavi on the key indicators used to report on and monitor grant performance during implementation. Indicators in the performance framework include agreed baselines, targets, data sources and a reporting schedule.

There is one performance framework covering all Gavi grants active in a country (vaccine support, health system strengthening support, cold chain equipment optimisation platform support, vaccine introduction grants, campaign support, demonstration programmes, etc.).

The grant performance framework reflects the intended result chains for all Gavi grants – tracking key inputs, key activities, intermediate results (mostly for health system strengthening) and intended outcomes (especially vaccine coverage and equity).

The grant performance framework contains a combination of core and tailored indicators.

- Core indicators: Core indicators are mandatory and have been chosen because of their centrality to Gavi's mission and decision-making criteria. They are based on standard definitions and are already, in almost every case, being monitored by countries – particularly through the Joint Reporting Form (JRF) which countries submit to WHO and UNICEF annually.
- Tailored Indicators: In order to ensure that the performance framework provides a complete overview of the support provided by Gavi grants, additional tailored indicators may be agreed between the country and Gavi.

Gavi will automatically populate the majority of core indicators in the grant performance framework, using WHO / UNICEF joint reporting form on vaccine preventable diseases, household surveys and campaign reports that are publicly available or previously submitted by countries. To avoid discrepancies between the finalised WHO / UNICEF joint reporting form on vaccine preventable diseases and the grant performance framework, countries are not able to amend this data, but have an opportunity to comment on the data to complete Gavi's understanding on progress. Countries are expected to input results into the grant performance framework for all remaining indicators.

Countries should report data when it becomes available, and as per agreed reporting schedule. The reporting schedule should be as closely aligned as possible to countries' planning cycles for health and immunisation programmes. It is particularly important to ensure that the grant performance framework is up to date, for all indicators due, four weeks before the annual Joint Appraisal takes place, as it will provide key information for the Joint Appraisal.

Whilst the grant performance framework largely focuses on quantitative data, countries are strongly encouraged to add a brief narrative to support the understanding of results in the portal. This is particularly relevant if targets are not met.

From time to time, a country's grant performance framework may be revised. Five situations may lead to this:

1. Addition of a new grant to the portfolio of Gavi support to a country;
2. Reprogramming of an existing health system strengthening grant in a country;
3. Closure of an existing grant;
4. Measurement-related challenges which have led to incomplete reporting (e.g. because the data source is no longer available);
5. Revision of targets and/or tailored indicators (outside of health system strengthening reprogramming) based on sound justification and rationale, particularly improved availability or quality of data, change of data source or previously set targets were not established at appropriate levels (i.e. too low or too high).

2.2. Financial reporting

For detailed guidelines on financial management and audit requirements, as well as the recommended format for financial reporting, see: www.gavi.org/support/renew

Financial reports are part of the reporting package in the country portal. **Interim reports are required 45 days after the period end, annual reports three months after the period end, and the annual audited Financial Statements six months after the period end**.

In accordance with the IHP+ principles of national ownership, countries are encouraged to manage Gavi funds using their own country systems. However, Gavi has adopted a set of high-level principles under which funds should be managed, known as the Transparency and Accountability Policy (TAP). Furthermore, Gavi has developed a number of additional operational level financial management guidelines.

Countries receiving Gavi cash based support must provide periodic financial reports for each grant, Annual Financial Statements and Annual Audit Reports. This requirement applies to all cash-based support, such as health system strengthening grants, vaccine introduction grants, operational support for campaigns, product switch grants, etc.[4]

Financial reporting timelines should be aligned to the country's fiscal cycle.

The financial reporting requirements differ for countries based on various factors. In all cases, reports need to be prepared in accordance with the terms set out in the Partnership Framework Agreement (PFA) signed between Gavi and the country, and any subsequent formal amendments including its Annexes.

Gavi's standard financial reporting requirements

Requirement	Frequency	Key terms
Periodic Financial Report	• Interim report – by default every 6 months[5], due 45 days after the period end	• Needs to be prepared for each cash grant for the period of reporting

[4] It also applies for support no longer open to new applications: Civil society organisation (CSO) support, Injection Safety Support (INS) and Immunisation Services Support (ISS). It also includes support for human papillomavirus vaccine (HPV) demonstration projects and Ebola recovery, as well as support for operational costs of outbreak response campaigns.

[5] Six monthly is set as the default, but the frequency of this report may also be quarterly or annually.

Requirement	Frequency	Key terms
		according to the provisions of the PFA as amended by the GMR
Annual Financial Statements	• Due 3 months after end of fiscal year (i.e. by 31 March for countries with a January to December fiscal year)	• Needs to be prepared for each cash grant for the period of reporting
Audit Report	• Due 6 months after end of fiscal year (or 6 months after end of grant in case of end of grant audit)[6]	Each audit to cover one fiscal year of the country relating to Gavi cash grants according to the provisions of the PFA as amended by the GMR • To be performed by independent external auditors with suitable qualifications[7] • To cover all aspects of Gavi financial support implemented in the country[8]

2.3. Stock reporting

End of year stock level reports **must be provided by 15 May** at the latest.

All countries receiving vaccine support must provide at least once a year reporting on stock levels. This includes information on doses received and stock held at different levels. End of year stock reports must be provided to facilitate the vaccine allocations required for the following year, as part of the annual vaccine support renewal process.

More frequent stock reporting might be requested to support grant management, for example for larger countries with staggered vaccine deliveries.

2.4. Campaign reporting

Campaign reports are due **three months after the completion of a campaign**.

When a country is receiving Gavi support to conduct vaccination campaigns, specific reporting requirements apply. In order to monitor implementation and outcomes of Gavi-supported campaigns, countries are required to share with Gavi the following reports for each campaign supported:

1. Supplementary Immunisation Activity (SIA) technical reports: to be provided within 3 months of the completion of each campaign phase.
2. Campaign coverage survey report: following each Gavi-supported campaign.
3. Close-out plans: to be provided within 3 months of the completion of each campaign phase.

[6] The Partnership Framework Agreement defines the deadlines for the audit reports and in the case of any conflict between the Partnership Framework Agreement and these guidelines, the guidance in the Partnership Framework Agreement shall prevail.

[7] For example, the Office of Auditor General or private auditing firms. The auditor needs to be acceptable to Gavi and the audit conducted in line with the Terms of Reference provided by Gavi and agreed with the country.

[8] The audit shall include verification of expenditure eligibility, procurement, budget and financial management, and physical inspection of goods, works and services acquired.

4. WHO-UNICEF annual technical reports (for Meningococcal A Conjugate Vaccine (MenA) and Yellow Fever (YF) Vaccine only): available annually by 30 March and submitted by Gavi Partners.

2.5. Immunisation financing and expenditure information

The information on immunisation financing and expenditure must be provided **not later than four weeks before the annual Joint Appraisal** takes place.

Countries are required to report annually on the expenditures and financing for immunisation in the previous year. The reported figures should be entered in US dollars, and should not include any shared costs. The information is used to guide Gavi's understanding and allow further analysis of the broad trends in immunisation programme expenditures and financial flows, and is for example used for Gavi Board reports.

2.6. General programme and country reporting

General programme information should be provided as soon as it becomes available. However, it must be provided **not later than four weeks before the annual Joint Appraisal** takes place.

Information requested in terms of general programme and country reporting comprises data and reports that countries routinely prepare in monitoring their national immunisation and health programmes. A number of the below listed reviews are conducted in larger intervals (for example every five years). It is thus expected that a country would share the initial review, assessment or survey, and any subsequent annual updates. The information will be captured in a document library, with a vision of having it accessible at multiple points during a grant life cycle.

a. Data quality

The Gavi Alliance data quality requirements are explained in the general guidelines for applications for all types of Gavi support, available here: www.gavi.org/support/process/apply/

Quality and timely immunisation coverage data are essential for programme planning and monitoring. Establishing routine mechanisms for assessing, monitoring and strengthening the availability, quality and use of immunisation coverage data should be an ongoing institutionalised process. It should be accompanied by the development and monitoring of costed improvement plans, incorporating activities addressing all administrative levels and promoting capacity-building in data collection, analysis and use, with timely and appropriate feedback mechanisms.

Gavi requires that countries provide the following reports on routine monitoring and strategic planning of immunisation coverage data for strengthened programme management and accountability:

1. Current immunization data quality improvement plan;
2. Final report from the most recently conducted desk review of immunization data quality;
3. Final report from the most recently conducted in-depth data quality evaluation including immunization;
4. Final report from the most recently conducted national survey containing immunization coverage indicators.

b. Effective vaccine management (EVM)

A recent effective vaccine management (EVM) assessment report is routinely submitted as part of a country's application to Gavi. Countries are expected to provide an annual progress update against the assessment findings and improvement plan.

c. Post introduction evaluation (PIE)

Following the introduction of a new vaccine with Gavi support, countries are expected to share the report of the subsequent Post Introduction Evaluation.

d. Expanded programme on immunisation (EPI)

Countries receiving Gavi support regularly conduct reviews of the expanded program on immunisation (EPI), supported by Gavi Alliance partners. expanded program on immunisation review reports should be shared with the Gavi Secretariat.

e. Measles-rubella 5 year plan

Gavi's new strategy on measles and rubella envisages a more comprehensive and long-term approach towards the control of measles and rubella.

All countries receiving Gavi support for measles or measles-rubella vaccine, should annually update their 5 year plan for measles and rubella activities at the time of the Joint Appraisal, with detailed planning of all measles and rubella activities for the first 12-18 months and a summary of indicative activities planned for the coming five years. This 5 year plan should build on existing data and national plans (e.g. annual expanded program on immunisation plan, comprehensive multi-year plan for immunisation, campaign reports, surveillance bulletins, Joint Reporting Form and/or national strategic plan for measles and rubella elimination) and include:

Past performance

- A description of the surveillance (case-based and sentinel) system and performance for at least 5 years, at national and subnational levels.
- A description of the epidemiological trends and patterns (distribution by age, geography, etc.) for measles and rubella (including CRS), including outbreaks, for the past five years.
- An analysis of coverage trends and dropout rates for MCV1 and MCV2[9] in routine (national and sub-national); coverage results from measles or measles-rubella campaigns, including post campaign coverage surveys; lessons learned from implementation of routine and campaigns, and efforts to cover hard to reach areas and other populations (e.g. women of child bearing age, health workers).

Future plans

- Summary of priority objectives and targets for measles and rubella.
- High level plan of activities for measles and rubella for the coming 5 year period (e.g. campaigns, MCV2 introduction, MR introduction, MCV routine immunisation strengthening, surveillance strengthening, outbreak preparedness).
- Detailed plan of all measles and rubella activities for the first 12-18 months, as well as resources needed, including technical assistance needs, resources available and gaps.

[9] *Measles containing vaccine, first dose and second dose.*

f. Health system strengthening reports

Gavi's health system strengthening support should be reflected in a country's **Operational Plan for the Immunisation Program** and the plan should be shared with the Gavi Secretariat. If available, countries should also share their **Operational Plan for the Health Sector**. Implementation progress and challenges related to health system strengthening support should be discussed and reflected within the Joint Appraisal. In order to respond to implementation bottlenecks and/or learn from best practices, changes may be proposed to the health system strengthening budget and workplan (see Section 3.2 for additional detail).

In order to provide an assessment of achievements and challenges, as well as lessons learned from health system strengthening grants, countries have the option to conduct an **independent health system strengthening midterm** or **end of grant evaluation**. The decision to undertake an evaluation should strongly consider the feasibility and relevance of conducting the evaluation and use of the findings (i.e. will the country be applying for another health system strengthening grant). Countries should consider aligning the evaluation to existing in-country assessments such as the annual health sector reviews and mid-term review of the national health plans.

g. Human papillomavirus vaccine (HPV) demonstration programme reporting

Human papillomavirus vaccine demonstration programme reporting is due at the end of year one and two of the demonstration programme. It is only required from countries with a Gavi human papillomavirus vaccine demonstration grant.

Gavi's support for human papillomavirus vaccine demonstration programmes has specific reporting requirements with the aim to assess feasibility, acceptability, sustainability and integration opportunities of the human papillomavirus vaccine delivery strategy.

The following reports need to be provided at the end of year one of the demonstration programme:

1. Community-based human papillomavirus vaccine coverage survey
2. Micro-costing analysis
3. Post introduction evaluation report
4. A report of the assessment of adolescent health interventions, with conclusions about what interventions would be feasible for integration in year two.
5. A summary of the activities completed and progress towards development of a national cervical cancer prevention and control strategy.

At the end of year two of the human papillomavirus vaccine demonstration programme, items one and two above should also be provided if there has been a change in the delivery strategy. Further, a final report on item five is required at the end of year two.

2.7. Particular circumstances

a. Reporting in the case of pooled funding

Gavi accepts pooled funding in general and understands that it represents a special case with specific considerations for budgeting, reporting and assurance[10]. Reporting requirements and arrangements will be agreed on a case by case basis, depending in particular on the pooled funding arrangement. In any case, both annual financial reporting and programmatic reporting is expected, and similar to all other support mechanism, the performance and challenges of support channelled through a pooled fund arrangement should be discussed during the Joint Appraisal and subsequent renewals requested.

b. Reporting for self-procuring countries

Information on Gavi's policy for self-procurement is available at:
www.gavi.org/about/governance/programme-policies/self-procurement-policy

In cases where a country is self-procuring vaccines with Gavi support, it is required to submit satisfactory evidence of purchase of vaccine doses (including the co-financed portion) and related supplies communicated in the relevant Decision Letter, by submitting purchase orders, invoices and receipts.

Any balance of Gavi funds disbursed in support of country self-procurement should be reported to Gavi together with satisfactory evidence that the non-utilised funds have been used within the immunisation programme.

c. Transition plan

Information on Gavi's approach to sustainability and its transition policy is available at:
http://www.gavi.org/support/sustainability/
http://www.gavi.org/about/governance/programme-policies/eligibility-and-transition/

Gavi support is aimed at lower-income countries, it is time-limited and directly linked to the governments' ability to pay for vaccines, depending on which phase of the Gavi transition process a country has reached. Countries entering the transition phase are expected to develop and share with Gavi a transition plan and may access transition grant funding to assist in the transition process. The transition plan is a government-led plan to address key bottlenecks and leverage opportunities towards successful transition.

Countries should provide an update on the implementation progress of planned transition activities as part of the annual Joint Appraisal, explaining bottlenecks and corrective actions, and indicate whether any significant changes are proposed to activities funded by Gavi through the transition grant (e.g., dropping an activity, adding a new activity or changing the content/budget of an activity.

[10] For additional requirements and considerations refer to the guidelines on financial management and audit requirements on www.gavi.org/support/renew

3. Renewal

As part of the ongoing grant cycle, Gavi reviews and renews its support to the country annually. This is a pre-requisite for vaccine delivery, cold chain equipment optimisation platform support and/or cash disbursement for the next year.

While Gavi approves support for multiple years, a country is required to request the renewal of all types of Gavi support annually. The renewal process has several components, with distinctive timelines.

- Submission and processing of vaccine renewal and/or extension request and subsequent determination of vaccine allocations (see section 3.1)
- Submission of health system strengthening (HSS) and cold chain equipment optimisation platform (CCEOP) renewal requests (see section 3.2 and 3.3)
- Joint Appraisal of Gavi support (see section 3.4)
- Review by Gavi and subsequent renewal decision (see section 3.5)

During the renewal process, results for the previous year are reviewed, and the decision is made for renewal of support for the following year, covering vaccines and cash based support. For example, during a renewal process taking place in 2017, results achieved in 2016 (and reported in 2017 per requirements set out in previous section) will be reviewed, and grant renewals and extensions will be processed for Gavi support for 2018.

The graph below shows a sample renewal timeline:

By 15 May of each year, countries must submit the request for renewal and/or extension of vaccine support. The vaccine renewal request contains the indicative calculation of required co-financing from the country and must be signed by the Minister of Health and the Minister of Finance.

The timing of the other renewal components – the submission of the health system strengthening and cold chain equipment optimisation platform renewal request and Joint Appraisal – will be agreed between the country and the Gavi Secretariat upfront, taking into consideration the fiscal year, the country timeline for data collection and report completion, other scheduled reviews and

assessments, such as an expanded programme on immunisation review, as well as the timelines for Gavi's renewal process.

Health system strengthening and cold chain equipment optimisation platform renewal requests must be submitted four weeks before the Joint Appraisal takes place.

Several times a year, a designated Gavi panel reviews countries' renewal/extension requests and Joint Appraisal reports, taking into consideration the reported results and projected needs and plans for the following year. The review body makes recommendations on continued funding as well as suggestions to strengthen grant performance and accountability.

Grant renewal recommendations are ultimately approved by the Gavi Chief Executive Officer.

During the process of grant implementation, certain modifications to the original approved application may be required. These should be discussed during the Joint Appraisal, need to be reviewed and endorsed by the relevant national Coordination Forum (Inter-agency Coordinating Committee, Health Systems Coordinating Committee or equivalent body), and included as part of the Joint Appraisal report for approval by Gavi. If these modifications are of a more urgent nature, the country should contact the Gavi Secretariat and the local WHO/UNICEF office.

3.1. Renewal and/or extension of vaccine support

Renewal and/or extension requests for new and underused vaccine support (NVS) must be submitted by 15 May.

Overview

Requests for renewal of vaccine support (referred to as NVS renewal requests or vaccine renewal requests) must be made on an annual basis and follow specified timelines due to Gavi's vaccine procurement, which is conducted globally. Specifically, all countries receiving Gavi vaccine support must submit the required information for vaccine renewal via the country portal by 15 May of each year.

The vaccine renewal request comprises information on existing stock levels, wastage rates, targets for the upcoming year, requests to switch vaccine presentation, indicative calculation of monetary value of the requested Gavi support and the required co-financing from the country. The vaccine renewal request must be signed by the Minister of Health and Minister of Finance.

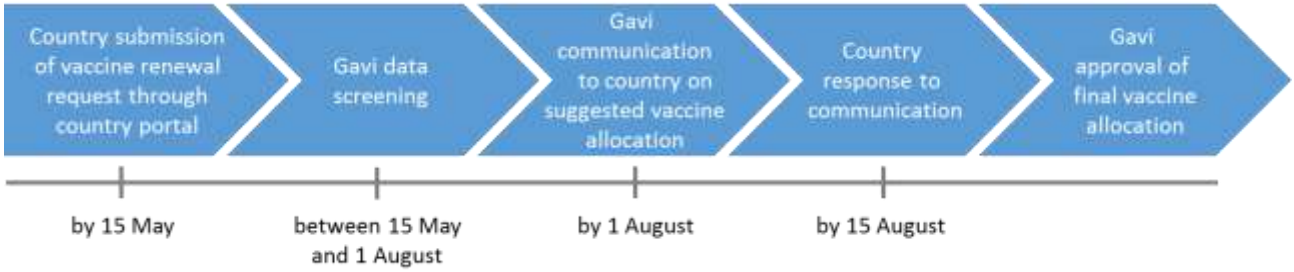
It is important that required renewal information, as well as stock reports are submitted on the country portal to allow the processing of the renewal request. For example, the target population to be vaccinated and end of year stock level reporting is imperative for determining the vaccine allocations described below.

Following the online submission by all countries of their vaccine renewal request by 15 May, the Gavi Secretariat reviews the validity and consistency of the information provided. Based on historical performance and future year targets, Gavi will communicate to each country the suggested vaccine allocations for all existing vaccine programmes, as well as any pending clarifications. Countries are requested to respond to this communication within 15 days, and if no response is received from the country, it is assumed that the suggested vaccine allocations have been accepted. Gavi then

approves the final **vaccine allocations**. This process, including timelines, is presented in the figure below.

A country's final vaccine allocation is subsequently reviewed by the High Level Review Panel (HLRP), or an appropriate Secretariat body, together with the health system strengthening renewal request and cold chain equipment optimisation platform renewal requests and Joint Appraisal report, for the renewal of existing support.

Figure: Timeline for vaccine allocation approval



Extension requests

Usually, Gavi approves vaccine support for the duration of the comprehensive multi-year plan for immunisation (cMYP). When a country's vaccine support is coming to an end and the country is still eligible for Gavi support, it may submit a request to extend the support (extension).

The extension request is processed as part of the annual review of vaccine support.

When a country requests an extension, it must provide to Gavi the most recent comprehensive multi-year plan for immunisation. The extension can be requested for a maximum of the duration of the new/updated comprehensive multi-year plan for immunisation. If a country does not have a valid comprehensive multi-year plan for immunisation, Gavi may exceptionally extend the vaccine support for up to one year. However countries must submit the new/updated comprehensive multi-year plan for immunisation by the end of that calendar year. After the new/updated comprehensive multi-year plan for immunisation has been submitted, the country will need to request an extension the following year for the remaining years of the new/updated comprehensive multi-year plan for immunisation.

Renewal of phased campaign support

In cases where a country is receiving support for multi-year phased campaign support, the campaign-related vaccine information and requirements, such as presentation, stock levels, target population to be vaccinated etc., should be included in the annual renewal request of vaccine support.

Changes to introduction and/or coverage plans

Countries are required to communicate to the Gavi Secretariat and partners (UNICEF Supply Division, WHO) if there are any changes in introduction and/or coverage plans (e.g. accelerated or delayed introduction or increases or decreases in vaccine use). Any changes must be endorsed by the Inter-agency Coordinating Committee or equivalent governance body. Revised introduction and/or coverage plans should be communicated through routine reporting to Gavi, discussed during the Joint Appraisal and included as part of the Joint Appraisal report for review and approval by Gavi. However, in urgent situations, especially those impacting vaccine requirements or shipments,

changes should be brought to the immediate attention of the Gavi Secretariat and the local WHO and UNICEF office.

Product or presentation switch

In certain cases, countries may request a switch to a different product or presentation of a routine vaccine containing the same antigen from what had been originally planned and approved. A product switch request is submitted at the time of the new and underused vaccine support renewal request, i.e. through the country portal and by the same deadline of 15 May each year.

The table below presents a summary of the key reasons for a product or presentation switch and identifies the corresponding process for requesting for the switch.

Type of product or presentation switch	Rationale	How does the country request the switch?
Supply disruption	The supply for a country's preferred presentation is disrupted and the country needs to temporarily move to a different presentation until the supply of the preferred product is restored.	The country does not need to submit a formal request (Gavi will inform the country of the need to switch).
Manufacturer discontinuation / Gavi no longer procuring a product	The country may need to permanently switch to another product that is procured by Gavi.	
Gavi offering a new product	As manufacturers are continuously developing new products and presentations, Gavi may choose to offer a new product on its "menu".[11]	The country must submit a request through the country portal as part of the annual renewal cycle, or if urgent, through a letter to Gavi and the procurement partner.
Changes in country's preference for a product	This might occur because a country was originally unable to introduce its preferred presentation (e.g. due to supply constraint) or because it recognizes that the product originally introduced is not optimal for programmatic (e.g. serotype distribution) or financial reasons (e.g. higher price than alternative products).	

A country may apply for a **product switch grant** to facilitate the transition. The purpose of this grant is to cover a portion of the one-time investments associated with the product or presentation switch (e.g. training, document production and printing, procurement of cold boxes). The ceiling for the grant is US$ 0.25 per child for infant vaccines and US$ 0.80 per girl for human papillomavirus vaccines. To apply for a product switch grant, countries must submit a detailed budget using the product switch budget template available at: www.gavi.org/library/gavi-documents/guidelines-and-forms/.

If vaccines are procured through UNICEF, the country will be notified of the updated dose calculations and grant amounts (if eligible) through the Decision Letter for the next year of support. The letter will also contain information on Gavi's ability to meet the product switch request and timelines for supply availability.

[11] For instance, a move from 1 dose vials to 4 dose vials for the same product or if a new product becomes pre-qualified (either by a new or an existing manufacturer).

3.2. Renewal of health system strengthening support

Overview

Renewal requests for health system strengthening support must be submitted four weeks before the Joint Appraisal takes place.

Countries receiving health system strengthening (HSS) support must submit a renewal request annually in order to request the next funding tranche. With the health system strengthening renewal request the country communicates the amount of the next funding tranche it requests for the upcoming year and submits an updated budget reflecting relevant budget reallocations, as may be applicable. The annual review to renew health system strengthening support also serves to establish whether a country may obtain a performance payment.

The renewal request for health system strengthening support must be submitted four weeks before the Joint Appraisal takes place. At that time, the country must also ensure that reporting requirements, as described in section 2 of these guidelines, have been fulfilled.

Even if a country is not requesting the next tranche of health system strengthening funds (e.g. has funds remaining from the previous Gavi disbursement or has already received all health system strengthening grant commitments), it must still report on the utilisation of funds in the previous year and should submit a zero-budget renewal request. The country may also submit a request for reallocation of the health system strengthening grant budget, as applicable.

Performance payment

Details on Gavi's performance based funding approach for health system strengthening funding is available in the health system strengthening support application guidelines here: www.gavi.org/support/process/apply/

Health system strengthening support is structured as performance-based funding and countries may be eligible for a performance payment starting from the second year of grant implementation, based on performance in the previous year in improving and/or maintaining equitable immunisation coverage.

The grant performance framework tracks the key indicators to determine country eligibility for a performance payment, which is also reviewed during the joint appraisal and by Gavi's dedicated renewal panel. Following the review and the decision made by the High Level Review Panel, or the appropriate Secretariat body, countries are notified if they are eligible or not eligible for the performance payment.

Countries must submit a budget to the Gavi Secretariat **within three months** of being communicated the performance payment amount for which they are eligible. This deadline will be communicated along with the performance payment eligibility, amount and timeline, either in the Decision Letter or Management Letter following the Gavi review. Countries are encouraged to update their existing health system strengthening grant budget with the additional performance payment amount, in order to ensure integration of additional activities with existing support, reduce potential duplication and facilitate annual reporting. Countries should clearly demonstrate how the performance payment was allocated (e.g. increase in existing budget lines or creation of new budget lines).

Budget reallocations and reprogramming

Under its current Health System and Immunisation Strengthening Framework, Gavi encourages countries to conduct integrated budget planning processes for all health system and immunisation strengthening support, which includes health system strengthening grants and associated performance payments, vaccine introduction grants, product or presentation switch grants, Transition Grants, Operational Support for Outbreak Response Campaigns, and operational support for campaigns, with annual reviews.

Gavi recognises that health system needs evolve over time. Countries are encouraged to update the detailed operational budget and work plans regularly (e.g. every 1-2 years) to proactively respond to new evidence (e.g. from program reviews and assessments), new risks identified, implementation to date, and progress towards the agreed targets. The integrated budget planning together with the regular review are expected to foster continued alignment with country operational budgets, identification of synergies across Gavi grants, as well as the identification of possible savings from Gavi cash grants. Residual funding from a Gavi cash grant may be reallocated towards health system strengthening grant investments. This should be done as part of the existing Joint Appraisal process to track progress and results, consider how new data could inform revisions to operational plans and budgets, identify best practices and joint learning, and identify potential synergies across Gavi investments.

Modifications to the Gavi grant budget and work plans should be discussed during the Joint Appraisal, endorsed by the Inter-agency Coordinating Committee or equivalent, and submitted to Gavi for approval (ideally at the time of the health system strengthening grant renewal request or when submitting the Joint Appraisal report). The country should provide to Gavi (1) the revised workplan, budget and updates to the grant performance framework, annotating the changes, and (2) minutes of the meeting when the modification was endorsed, signed by the Health Systems Coordinating Committee or Inter-agency Coordinating Committee.

Gavi makes a distinction between reallocation and reprogramming of a health system strengthening grant based on the extent of changes proposed:

Reallocation refers to the case where the original health system strengthening grant objectives are not changed and new/revised activities do not create significant changes to the approved budget (up to an indicative amount of 25% of the originally-approved total health system strengthening budget or a maximum of US$10 million, whichever is lower).

Budget reallocations should be incorporated into the health system strengthening renewal request and Joint Appraisal discussion. Budget reallocations should reflect implementation to date and possible adjustments required to complete grant objectives and activities within the original timeframe, as well as continued alignment with national plans and priorities.

Reprogramming is a more significant modification of the health system strengthening grant, with new or substantially revised objectives or activities being proposed, and/or significant changes to the budget (indicatively 25% or more of the total budget, or over US$10 million). Reprogramming requires a formal request from the country, using the relevant forms and guidelines for this purpose, and must be endorsed by the national Coordination Forum (ICC, HSCC or equivalent body). A reprogramming request is reviewed by the Independent Review Committee.

Reprogramming may be conducted only once during the lifetime of a grant. The reprogramming request must be submitted for all the remaining years of the grant and include a revised workplan and budget (must be aligned with the national health plan / comprehensive multi-year plan), an updated performance framework, as well as a revised timeline for implementation. A country considering to submit a reprogramming request should as part of the planning and decision process liaise with the Gavi Senior Country Manager.

No-cost extensions and grant closure

When a country comes to the end of the approved health system strengthening grant timeline, the grant is closed out unless, in exceptional circumstances, a no-cost extension is approved. A no-cost extension may be requested when implementation has been delayed, and planned activities remain largely unchanged.

A no-cost extension request needs to be communicated to the Gavi Secretariat prior to renewal of the last approved year of the health system strengthening grant. It may be requested only once during the life of a grant and for maximum a one year duration at the end of the total grant period.

The Health Systems Coordinating Committee, Inter-agency Coordinating Committee or equivalent governance body needs to endorse a no-cost extension request and the country is required to submit to Gavi an updated workplan (linked to a revised grant performance framework) showing the implementation plan for the remaining activities and funds, adjusted over the proposed no-cost extension period.

3.3. Renewal of cold chain equipment optimisation platform support

Renewal requests for cold chain equipment optimisation platform support must be submitted four weeks before the Joint Appraisal takes place.

Countries receiving cold chain equipment optimisation platform (CCEOP) support must submit an annual renewal request, communicating any changes from the initial request for the upcoming year, as may be applicable. The country will also reconfirm the country joint investment, through country, partner or Gavi health system strengthening grant resources.

The timing of the submission of the renewal request for cold chain equipment optimisation platform support should be identical with the timeline for submitting the country's health system strengthening support renewal request. Both requests must be submitted at least four weeks before the Joint Appraisal takes place.

3.4. Joint Appraisal

Overview

The Joint Appraisal (JA) is a key element of Gavi's grant management and renewal processes. It is an in-country, multi-stakeholder review of the implementation progress and performance of Gavi's support to the country, and of its contribution to improved immunisation outcomes.

The primary objective of a Joint Appraisal is for all relevant stakeholders to jointly review grant performance, to achieve a common understanding of persistent challenges impeding progress, to highlight areas where greater efforts and national investments, as well as technical support, are

needed, to enable consideration of how to optimize Gavi's support to help improve immunisation outcomes, and to inform the decision on the renewal of grants.

The multi-stakeholder nature of the Joint Appraisal aims to foster stronger collaboration between government, partners, other in-country and Gavi stakeholders, and achieve a common understanding of opportunities, challenges and critical needs for support and technical assistance related to Gavi's support and its core priority of sustainable enhancements to immunization coverage and equity. The Joint Appraisal should not be viewed as a review of the national immunisation programme.

The Joint Appraisals should, where possible, be planned to align with a country's annual planning processes, fiscal cycles, or with relevant in-country multi-partner reviews or activities. The timing of the Joint Appraisal should also take into account major steps in the cycle of Gavi support, for example the procurement of vaccines and deliveries, renewal decisions, and issuing of Decision Letters.

Reporting requirements: It is important to ensure that reporting requirements, as described in section 2 of these guidelines, have been fulfilled at least four weeks before the Joint Appraisal takes place. Failure to do so may impact the decision by Gavi to conduct the Joint Appraisal meeting and renew its support.

The following reports are essential for the renewal of existing support:

- Update of the grant performance framework (GPF) for indicators which are due
- Periodic financial reports, annual financial statements and audit reports (for all types of direct financial support received, with specific submission deadlines depending on a country's fiscal year)
- End of year stock reporting (which is compulsory to be submitted by 15 May of each year to calculate future vaccine requirements)

Other critical information to be posted on the Country Portal four weeks prior to the Joint Appraisal include:

- Pre-Joint Appraisal data analyses / coverage and equity analyses (as described in the Joint Appraisal analysis guidance / Annex B)
- Immunisation financing and expenditure information
- Data quality information (including annual desk review and progress report on the implementation of immunisation data quality improvement plans)
- Annual progress update on the Effective Vaccine Management (EVM) improvement plan
- Campaign reports (if applicable)
- Human papillomavirus vaccine specific reporting (if applicable)
- HSS end of grant evaluation (if applicable)
- Post introduction evaluation (PIE) reports (if applicable)
- Expanded programme on immunisation (EPI) reviews (if applicable)
- Transition plan (if applicable)

Other information that will inform the Joint Appraisal discussion include:

- Report by WHO and UNICEF on their technical assistance milestones funded through the Partners' Engagement Framework
- Full Country Evaluation report (if applicable)
- Other evaluation of Gavi programmes

Joint appraisal design principles: Some key design principles are important to keep in mind to ensure the quality of the Joint Appraisal and its outcomes. The Joint Appraisal should:

- Be co-convened by the Ministry of Health (MOH) and Gavi Secretariat
- Be inclusive of relevant national and international stakeholders
- Enable unbiased, evidence-based discussions
- Build on existing country processes and results of other reviews
- Be conducted in-country at a suitable agreed between the country and Gavi Secretariat
- Identify actionable recommendations
- Document the process, findings and recommendations in a report that is endorsed by the Inter-agency Coordinating Committee or Health Systems Coordinating Committee. The targets, reported performance of the grants and the request for continued HSS funding are also to be endorsed at this time.
- Be supported through intensive engagement by the Gavi Secretariat

Participants: The following stakeholders typically participate in a Joint Appraisal:

- Relevant staff from the Ministry of Health and Ministry of Finance;
- Members of the Inter-agency Coordinating Committee (ICC) and Health Systems Coordinating Committee (HSCC), including civil society organisations if appropriate;
- Staff from Alliance partner organisations; and
- Relevant Gavi Secretariat staff.

Differentiation options

For a number of countries receiving Gavi support, differentiation options are possible between a full Joint Appraisal and a lighter Joint Appraisal update.

Full Joint Appraisals are conducted in-country, using the dedicated comprehensive template, and with full engagement of key stakeholders and by Alliance partners, including from regional and global structures.

Joint Appraisal Updates are a lighter version of the Joint Appraisal, with greater flexibility in terms of appraisal modalities and participation. For a Joint Appraisal update countries are invited to focus primarily on the thematic areas that have changed since the last Joint Appraisal was conducted, and those most relevant from a performance perspective. Joint Appraisal updates are normally conducted with a more limited participation of stakeholders. As a minimum, country representatives and the Gavi Secretariat (Senior Country Manager) must participate. A Joint Appraisal update can be organised in-country or with some participants contributing remotely; the exact modalities are to be agreed between the key stakeholders.

Both full Joint Appraisals and Joint Appraisal updates should be discussed and endorsed by the national coordination forum (ICC, HSCC or equivalent); and are reviewed by Gavi as part of the annual renewal process.

Characteristics	Full Joint Appraisal	Joint Appraisal update
Process lead	Process co-convened by the Ministry of Health and Gavi Secretariat	
Purpose	A multi-stakeholder review of the implementation progress and performance of Gavi's support and its contribution to improving immunisation outcomes and to strengthening the	An interim progress report, based on discussions between the Ministry of Health and Gavi Alliance on routine monitoring and documents

	capacities of countries to independently sustain their immunization programmes.	
Location	In-country	In-country or remotely
Basis of discussion	Build on previous Joint Appraisal outcomes and focus on progress to date or changes in country situation Refer to existing country processes and results of other reviews	
Participation	Be co-convened by the Ministry of Health (MOH) and Gavi Secretariat Be inclusive of relevant national and international stakeholders (e.g. WHO and UNICEF) Be supported through intensive engagement by the Secretariat in-person	Be co-convened by the Ministry of Health (MOH) and Gavi Secretariat Be inclusive of relevant in-country partners (e.g. WHO and UNICEF) Less emphasis on participation by international partners Be supported through intensive engagement by the Gavi Secretariat
Template	Joint Appraisal report template, available on http://www.gavi.org/library/gavi-documents/guidelines-forms/	
Report content	Comprehensive report on analysis of performance; identification of actionable recommendations	Short report to update actionable recommendations for Gavi Secretariat (what has been achieved and what remains or is needed to improve outcomes)
Endorsement	Endorsed by the ICC/HSCC or equivalent	

The decision to conduct either a full Joint Appraisal or Joint Appraisal update may depend on a number of factors:

- In line with Gavi's Partners' Engagement Framework, a subset of countries have been prioritised on the basis of scale and severity of challenges related to coverage and equity of immunisation. These twenty countries will conduct full Joint Appraisals annually.

- Other countries may conduct either a full Joint Appraisal or a Joint Appraisal update. In any case, full Joint Appraisals must be conducted every second or third year. The decision between a full Joint Appraisal and Joint Appraisal update is usually made as part of the regular grant management exchanges between the country and the Gavi Senior Country Manager. Considerations taken into account include the level of investment and complexity of Gavi support, performance trends, or special circumstances (such as fragility, accelerated transition phase, etc.), and when the country last underwent a full Joint Appraisal.

Country	Type	In-country participation	Frequency
PEF priority	**Full Joint Appraisal**	Country, regional & global stakeholders	Every year
Remaining countries	**Full Joint Appraisal**	Country, regional & global stakeholders	Every 2nd (or 3rd) year
	Joint Appraisal update	Country stakeholders	Interim years

- The Gavi Secretariat may, in some rare and exceptional circumstances, such as when a country is at the final stage of transition, waive the requirement for a Joint Appraisal or a Joint Appraisal update for a country in a given year. In such case, a performance review would be ensured through other grant management processes, and all other aspects of the renewal process will remain unchanged.

Preparation of the Joint Appraisal and pre-Joint Appraisal data analysis

The planning and preparation process ahead of the Joint Appraisal meeting is critical in the perceived value of the Joint Appraisal.

It is important to coordinate the Joint Appraisal planning across country, Alliance partners and in-country stakeholders as as early as possible. Depending on the size of the country and complexity of the Gavi grant portfolio, a country may decide to convene a small "organising team" comprising members from the government, alliance partners WHO, UNICEF or others, and the Gavi Secretariat to coordinate and oversee the planning, implementation and follow-up of the Joint Appraisal.

A key aspect of preparation for the Joint Appraisal is to review relevant data and analyses to understand the progress against grant performance targets and to inform discussions around possible bottlenecks to grant performance (e.g. delayed reporting, unavailable data, key barriers to achieving expected results, etc.), including coverage and equity, to enable prioritization of targeted support as part of the Joint Appraisal recommendations.

Wherever possible, data and analyses to inform Joint Appraisal discussions should use analyses and reports already available and routinely generated in countries (for example: data and analyses drawn from expanded programme on immunisation reviews, annual desk reviews, data in joint reporting forms already compiled for routine reports such as WHO UNICEF Joint Reporting Form, routine programme monitoring metrics integrated into HMIS / DHIS2 / EPI or supply chain dashboards or alternates, equity analyses, coverage evaluation and KAP surveys). Gavi does not require data and analyses to be generated solely for the purpose of the Joint Appraisal. The necessary information is generally part of a country's routine EPI data and annual desk reviews. However, advance preparation may be required.

The Joint Appraisal analysis guidance (Annex B to these reporting and renewal guidelines)[12] outlines the suggested minimum set of data and analyses to be available to inform Joint Appraisal discussions and provides country examples previously found to be particularly effective (in terms of presentation or level of disaggregation). The minimum set of data and analyses can be supplemented with additional information where deemed relevant by the country. The resulting coverage and equity analysis should be provided as an annex to the Joint Appraisal report.

Joint Appraisal report

Countries are requested to use the Joint Appraisal report template for both a full Joint Appraisal and a Joint Appraisal update[13]. The report structure will help ensure completeness as well as a consistent

[12] Available on http://www.gavi.org/support/process/report-renew/joint-appraisals/

[13] The template can either be accessed by contacting your Gavi Senior Country Manager or on the Gavi website http://www.gavi.org/library/gavi-documents/guidelines-forms/

presentation. It will also help regional and global partners identify common issues across countries and inform how to best provide support. 1

Guidance on each Joint Appraisal section is incorporated in the template itself. The Joint Appraisal report contains a summary of the renewal and extension request, some country information, a performance analysis of the immunisation system general and Gavi grants in particular, and a summary of key activities and prioritised actions for the next year.

The Joint Appraisal discussion and analysis will draw from the earlier programmatic and financial reporting provided by the country to Gavi – to be submitted at the latest four weeks ahead of the Joint Appraisal meeting –, as well as other country information, data and analysis.

The Joint Appraisal is not a review of a country's immunisation system. Instead, the emphasis on the analytical review of existing information and data, and the subsequent activities to optimize Gavi's support to help improve immunization outcomes and sustainable enhancement of immunization coverage and equity.

3.5. Renewal decision

Several times a year, a designated Gavi panel reviews countries' renewal/extension requests and Joint Appraisal reports, taking into consideration the reported results and projected needs and plans for the next year. The review can be conducted either by the High Level Review Panel (HLRP), or another internal Secretariat body. The review panel makes recommendations on continued funding, as well as suggestions to strengthen grant performance and accountability.

In order to determine a recommendation for renewal of existing support, Gavi takes into account:

- The NVS renewal request and final vaccine allocation;
- The HSS renewal request and CCEOP renewal request (if any);
- Reported progress and results (with reporting requirements explained in these guidelines); and
- The Joint Appraisal report.

The review outcomes for countries may be (a) approval of the renewal; (b) determination of insufficient information (wherein the country is required to provide additional information or complete certain actions before approval); or (c) support is not renewed.

Grant renewal recommendations are ultimately approved by the Gavi Chief Executive Officer.

After the review meeting, countries will be informed by the Gavi Secretariat of the renewal recommendation, and any pending issue will be communicated that may require to be resolved before a formal Decision Letter is issued.

The renewal decision is formalised through a Decision Letter. As a general rule, vaccines will only be shipped and requested funds disbursed once a Decision Letter has been issued.

Annexes

Annex A - Considerations for deciding the timing of the Joint Appraisal

Certain factors should be discussed by country stakeholders to ensure a suitable time for the Joint Appraisal process:

- Timing of other planning or review cycles and related activities in country (e.g. fiscal cycle, annual work planning/reviews/evaluation). Ideally the Joint Appraisal would be timed to coincide with the end of the country's fiscal cycle and on the back of a review where key stakeholders would already be present in the country. This would allow the outcomes of the review to inform the appraisal discussion.
- Timing of other competing activities in country where key stakeholders may not be available to participate (e.g. elections, vaccine introductions, World Immunisation Week, etc.).
- The need (urgency) for disbursement of the next tranche of health system strengthening support or other cash grant.
- The availability of key data sources that inform the appraisal, such as, reports from household and facility surveys and other relevant assessments (e.g. data quality assessments), WHO/UNICEF Joint Reporting Form (JRF) .
- The time required to finalise the Joint Appraisal report, which must be submitted to the Gavi Secretariat in advance of the meeting of Gavi's renewal panel.

Annex B - Joint Appraisal analysis guidance

The Joint Appraisal analysis guidance can be directly accessed here: http://www.gavi.org/library/gavi-documents/guidelines-and-forms/joint-appraisal-analysis-guidance/

It is also available on the Gavi website at http://www.gavi.org/support/process/report-renew/joint-appraisals/