

DOCUMENT ADMINISTRATION

VERSION NUMBER	APPROVAL PROCESS	DATE
1.0	Prepared by: Nina Schwalbe, Managing Director, Policy and Performance	
	Reviewed by: Gavi Programme and Policy Committee	19 May 2010 22 October 2010 (Review of financial sustainability indicators)
	Approved by: Gavi Board	17 June 2010 Effective from: 17 June 2010
	Next review:	Following the application of the pilot prioritisation mechanism to two rounds
2.0	Reviewed by: Gavi Programme and Policy Committee	30 April 2013
	Approved by: Gavi Board	Effective from: 12 June 2013
	Next review:	After use in a funding shortfall or at Board request

1. Objectives

- 1.1. The GAVI Alliance Prioritisation Mechanism aims to inform GAVI's funding decisions in a resource constrained environment by enabling the ranking of country proposals recommended by the Independent Review Committee (IRC) for New Vaccine Support (NVS).
- 1.2. Specifically the prioritisation mechanism is directed by five objectives to: (i) Maximise health impact; (ii) Maximise value for money; (iii) Reinforce financial sustainability of immunisation programmes; (iv) Support countries with the greatest need; (v) Promote equitable distribution of GAVI's resources among countries.

2. Scope

- 2.1. Funding decisions for all vaccines included in the GAVI portfolio will be subject to the NVS proposal prioritisation mechanism described here.
- 2.2. NVS applications for Japanese Encephalitis and typhoid conjugate vaccines, as well as any other new vaccines added to the GAVI portfolio in the future will be subject to the prioritisation mechanism as and when application windows for these vaccines are opened.
- 2.3. Cash-based programmes (except from vaccine introduction grants and operational support for campaigns) are not subject to the prioritisation mechanism described here.

3. Operating guidelines

- 3.1. The prioritisation mechanism is designed to support nationally defined priorities and be objective, transparent and feasible. These operating guidelines are reflected in the indicators chosen to measure each objective as well as in the process for application of the mechanism.

4. Criteria

- 4.1. The following criteria will be applied in a weighted index to rank IRC-recommended NVS proposals:
 - Ratio of future deaths averted to total population from the first five years of vaccination (as a proxy for “health impact”).
 - Cost to GAVI per future death averted (as a proxy for “value for money”).
 - Co-financing performance for GAVI supported vaccines in the last five years measured by the number of years for which a country has not fulfilled its co-financing commitment (i.e. the country being in default as per the GAVI Co-financing Policy) and ‘Percentage of spending on vaccines used in routine immunisation financed with Government funds’ (as proxies for “financial sustainability of immunisation programmes”).
 - Gross national income per capita (as a proxy for “need”).
 - A maximum of one NVS proposal per country can be approved per application round (as a proxy for “equity among countries” applied as a rule rather than an input to the index).

5. Application of the mechanism

- 5.1. The Secretariat will maintain the prioritisation mechanism and apply it to each round of the new proposal Independent Review Committee for which there are insufficient resources available for the GAVI Alliance to fund all proposals recommended for funding from that round.
- 5.2. Weighting of objectives for NVS proposals: Health impact-30%; Value for money-30%; Financial sustainability of immunisation programmes-25%; Need-15%.
- 5.3. Ties: The health impact indicator should be used to break ties for NVS proposals.
- 5.4. Fate of unfunded proposal: Proposals that are not funded in a particular round would automatically go into the pool of new applications for the next application round. If in the next round, these proposals are still not funded, then countries would be asked to reapply.

6. Data sources

- 6.1. Estimates of future deaths averted from the impact modeling exercise jointly convened by the GAVI Secretariat and the Bill & Melinda Gates Foundation
- 6.2. Population data (total population, birth cohort) from UN Population Division
- 6.3. Immunisation coverage estimates from WHO/UNICEF best estimates
- 6.4. Average vaccine price per course over a five year period from GAVI average weighted price projections
- 6.5. Vaccine introduction grant and operational support for campaign amounts as per the latest GAVI policy
- 6.6. Co-financing performance for GAVI-supported vaccines in the last five years from GAVI Secretariat based on annual monitoring reports from the Immunisation Financing & Sustainability Task Team
- 6.7. Percentage of spending on vaccines used in routine immunisation financed with Government funds from adjusted WHO/UNICEF Joint Reporting Form
- 6.8. Gross National Income per capita (Atlas method) from the World Bank

7. Effective date and review of the mechanism

- 7.1. This mechanism comes into effect as of 12 June 2013 and will apply to inform GAVI's funding decisions if and when necessary as described in section 5.
- 7.2. The need to update the prioritisation mechanism will be assessed after its use in a funding shortfall or as and when requested by the Board.