

# Governance, monitoring, oversight and management

## 11.1 GOVERNANCE

11.1 As the primary WHO decision-making body, the **World Health Assembly**, comprised of all 194 WHO Member States, provides the highest level of governance of the GPEI (Figure 19). The World Health Assembly adopts the resolutions that determine the scope and direction for the GPEI globally and secures the commitment of all Member States to support the full implementation of the GPEI Strategic Plan. **WHO regional committees** allow for more detailed discussion by Member States, adopt resolutions on polio eradication and its impact at a regional level and provide input to **WHO Executive Board** deliberations that then inform the discussions at the annual World Health Assembly meeting.

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## 11.2 ADVISORY AND MONITORING

11.2 A set of advisory, monitoring and technical groups inform the decision-making of WHO governing bodies and provide oversight of the management bodies.

A set of oversight and advisory groups inform the implementation of the GPEI, including:

- The Independent Monitoring Board (IMB)
- The Strategic Advisory Group of Experts on Immunization (SAGE)
- Regional & national Technical Advisory Groups (TAGs)

11.3 The **Independent Monitoring Board (IMB)**, an independent body appointed by the Director-General of WHO after soliciting nominations from GPEI core partners (i.e., WHO, Rotary International, CDC, UNICEF) and the BMGF provides programmatic oversight of the GPEI, in particular the implementation of Objective 1 of the Plan. The IMB meets on a four-to-six-monthly basis to independently evaluate progress on the basis of polio epidemiology, poliovirus virology, standard performance indicators and other programme data. Additionally, the IMB provides assessments of the risks to the programme and informs the Polio Oversight Board. The IMB is comprised of global experts from a variety of fields relevant to the work of the GPEI. The IMB will continue in its functions until the end of 2015. The GPEI responds to the IMB's recommendations and guidance in managing eradication efforts.<sup>33</sup>

11.4 The **Strategic Advisory Group of Experts on immunization (SAGE)**, supported by the **SAGE Polio** and GVAP Working Groups, provides technical oversight for all GPEI global policy decisions on immunization. The SAGE will be the advisory body providing oversight on the implementation of Objective 2 of the Plan. The SAGE provides guidance to the World Health Assembly and informs the Polio Oversight Board. **Regional and national Technical Advisory Groups (TAGs)** are comprised of experts in related fields of polio eradication, and regularly convene to review a region or country's polio epidemiology and make recommendations for appropriate strategies to more rapidly achieve eradication.

11.5 The **Global Commission for Certification of the Eradication of Poliomyelitis (GCC)**, an independent body appointed by the Director-General of WHO, oversees the process for certifying the world as polio-free and will provide oversight on the implementation of Objective

<sup>33</sup> Reports of the IMB are available at <http://www.polioeradication.org/Aboutus/Governance/independentmonitoringboard/Reports.aspx>.

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3 of the Plan. **Regional Certification Commissions (RCC)**, independent bodies appointed by WHO regional directors, will certify their regions as polio-free once WPV transmission appears to have been interrupted in a region (i.e., 36 months after the last circulating WPV is detected), and provide the GCC with essential polio eradication documentation. **National Certification Committees** report to their respective RCC.

### 11.3 OVERSIGHT

11.6 **National governments** are both the owners and beneficiaries of the GPEI. Polio-affected countries should undertake the full range of activities detailed in their country plans and summarized in this Plan and take primary responsibility for the achievement of the first three major objectives of this Plan. Achievement of country milestones requires polio-affected countries to ensure accountability at the national, subnational and district levels and, with GPEI partners, to plan, implement and monitor the activities to reach every child with polio vaccines. Concurrently, national governments in the three WHO regions certified as polio-free and polio-free Member States in the three remaining polio-endemic regions have a critical role to play in maintaining high population immunity and sensitive surveillance for AFP. National authorities are also responsible for fully implementing internationally agreed processes to manage the long-term risks following WPV eradication, including applying biocontainment requirements and mainstreaming polio functions as part of the legacy work.

**The Polio Oversight Board (POB), comprised of the heads of agencies of core GPEI partners, provides close oversight of the GPEI and programme management, and ensures high-level accountability across the GPEI partnership.**

11.7 The **Polio Oversight Board (POB)**, comprised of the heads of agencies of core GPEI partners, provides close oversight of the GPEI and programme management, and ensures high-level accountability across the GPEI partnership. The POB receives and reviews input from the various advisory and monitoring bodies (IMB, SAGE, GCC) and operational information from the **Polio Steering Committee (PSC)**. The **POB's** directives are implemented by the PSC through the various programme management bodies. The POB meets quarterly. The POB's deliberations are also informed by the global Polio Partners Group (PPG).

11.8 The global **Polio Partners Group (PPG)** serves as the stakeholder voice for the GPEI in the development and implementation of strategic plans for eradication and fosters greater engagement among polio-affected countries, donors and other partners to ensure the GPEI has the necessary political commitment and financial resources to reach the goal of polio eradication. PPG meetings are held at the ambassadorial/senior-officials level and results are reported to the POB.

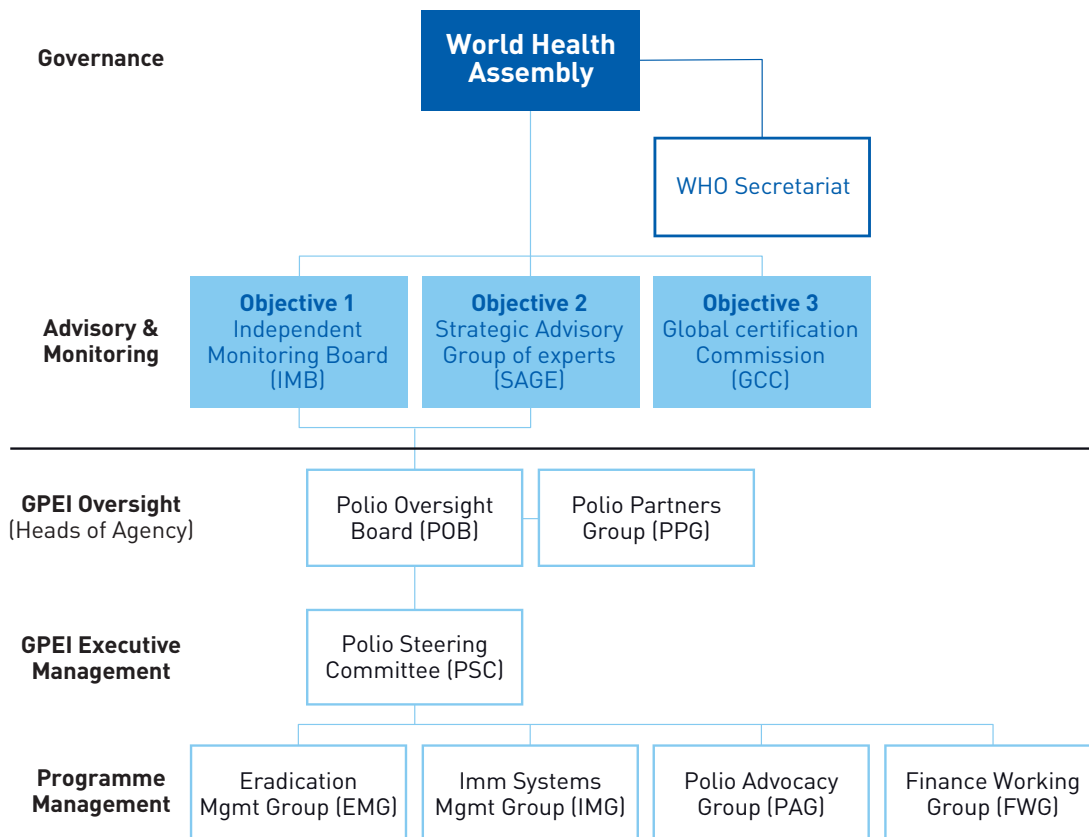
## 11.4 EXECUTIVE MANAGEMENT

### GPEI Partners

11.9 The GPEI's spearheading partners and the BMGF take primary responsibility for the management of activities described under the Enabling functions section (Chapter 10). This includes responsibility for providing technical support to countries in the implementation of their polio eradication efforts and the staffing surge to support national efforts. As part of the legacy, WHO and UNICEF will take responsibility for mainstreaming technical functions within existing and/or new or revised structures. The GPEI will coordinate the consultative aspect of the legacy process.

11.10 The **Polio Steering Committee (PSC)**, comprised of senior-level officials from the GPEI partner agencies, serves as the overall GPEI executive management body that closely reviews and monitors the global programme's various technical, financial and advocacy functions, provides direction and input to the work of the various management bodies, and also implements the directives of the POB. The PSC will drive the implementation of the objectives of the Plan and also provide necessary input to the advisory and monitoring bodies. The PSC's policy and strategy decisions are implemented through the GPEI management groups described below.

Figure 19: Governance structure for the implementation of the Plan



Source: GPEI, <http://www.polioeradication.org/>.

## 11.5 PROGRAMME MANAGEMENT

11.11 Four management groups that report to the PSC have overall responsibility for implementing the Plan, working with WHO and UNICEF regional offices, national governments, other stakeholders and country-level partners.

11.12 The polio **Eradication Management Group (EMG)** is responsible for the overall management of the activities under Objective 1: to achieve eradication in the endemic countries and those at highest risk of importation, attaining high-quality SIAs and surveillance while managing security risks. The work of the IMB, the SAGE, the GCC and RCCs and the regional and national TAGs informs and supports the work of the EMG.

11.13 The **Immunization Systems Management Group (IMG)** is responsible for the overall management of the activities under Objective 2: to strengthen immunization systems and introduce IPV and bOPV. The work of the IMB, the SAGE, the GCC and RCCs and the regional and national TAGs informs and supports the work of the IMG. The IMG also works closely with the Global Polio Laboratory Network and the PRC.

11.14 The **Polio Advocacy Group (PAG)** is responsible for the development and implementation of a cross-agency resource mobilization strategy to ensure that the required financing is available to fully implement the Plan. The PAG also works closely with and receives input from the communications staff of partner agencies and finance/resource management staff through the polio Finance Working Group.

11.15 The polio **Finance Working Group (FWG)** is responsible for closely tracking the programme's short- and long-term financing needs, developing consistent and accurate financial information for strategic decision-making and establishing processes to support the predictability of financing.

11.16 Additional groups reporting to the three management groups will be formed as needed to support key areas of responsibility and enabling functions. Management structures within the GPEI will be outlined in detail on the GPEI website at <http://www.polioeradication.org/>. These structures will be reviewed and modified regularly to reflect the changing needs of the initiative. In addition, the website will provide the terms of reference of GPEI management and functional support groups.