Polio Oversight Board
Meeting Minutes
10 January 2014 - Teleconference

Attendees:
• Chris Elias, Bill and Melinda Gates Foundation
• Margaret Chan, World Health Organization
• Tom Frieden, Centers for Disease Control and Prevention
• Tony Lake, UNICEF
• Wilf Wilkinson, Rotary International

Agenda
1. Review of POB scorecard
2. Review of risk registry
3. Decisions on GPEI process changes and recommendation on review of oversight and management of GPEI
4. Approval of operations/finance plan for 2014
5. Decisions on high level advocacy plans for Pakistan and Nigeria

Meeting Minutes

1. Review and agreement to use POB scorecard as a tool to monitor progress

Summary:
The Polio Oversight Board (POB) reviewed a new GPEI scorecard (prepared by CDC), approved its use as a regular scorecard for POB meetings, and discussed areas highlighted by the scorecard. The board made a number of suggestions for improving clarity of several of the indicators used (below, action items).

Decisions and Action Items:
• CDC to include footnote in the scorecard with additional explanation of status
• PSC to revisit whether or not to split the “kids missed due to not being seen” into whether this was due to missed houses or children not being home, due to different implications of these data and review other indicators that need to be updated
• PSC to discuss RI indicator definition applicability

2. Review and agreement to use Risk Registry as a POB tool

Summary:
The POB reviewed a new risk registry (prepared by WHO) as a tool that will be used to drive the work of the PSC and assist the POB in driving changes to the program. The POB approved the concept of the risk registry, and suggested several areas in which more clarity could be provided.
Discussion surrounding issues raised by the scorecard and risk registry:

Board members noted positive program developments (e.g. WPV3 not being seen in over a year, improvements in Northern Nigeria, renewed commitment from the Government of Pakistan, good results in the IPV campaign in Dadaab, and no huge case increases in Syria). The board discussed India’s 3-year anniversary of being polio-free, which will see increased media attention.

The POB noted that while responding to outbreaks remains important, the current chief priority of GPEI is to eliminate transmission in Pakistan and Nigeria, the sources of all WPV globally. The board discussed the status of SIA campaigns in these endemic countries as well as program staffing. The board agreed that campaign quality must be improved and highlighted the importance of filling staff vacancies of the major implementing agencies in these countries.

The POB agreed that 2014 is a critical year given the current eradication timeline - it will be important to strike another significant blow to WPV in 2014, with special focus during the current low season. The POB agreed that Nigeria was the most likely endemic area to be brought under control in 2014, and that GPEI should place major emphasis on activities to stop transmission there. The challenges to improving quality in Nigeria include overcoming local access issues; reducing missed vaccination opportunities and capitalizing on other campaigns; the reliability of tally sheets and data; fatigue among parents and vaccinators; and the desire for other health services.

The group also noted two additional areas for continued attention across the global program:

1. Surveillance: With higher immunization levels, fewer cases are being presented and the program needs to improve surveillance. Recent orphan viruses in Cameroon and Afghanistan highlight this risk.
2. IPV Introduction: There appears to enthusiasm around IPV and pilot introductions on the ground in Pakistan and Nigeria will help to galvanize introduction.

The board discussed OPV shortage and supply constraints in the first half of 2014. They noted that while the program has significant pledges, the “red” status in the financial section indicates the need to actualize these financial commitments.

The board noted that there are risks like South Sudan that were not explicitly included in the original budget but clarified that the six-year plan does include a significant budget lines for outbreaks, e.g. a $60M budget line in 2013 for outbreak response.

Discussing recent news surrounding outbreaks in Syria, the board agreed that communication about outbreaks is important. Key messages should include the concept that outbreaks can be expected, resources are included in the current budget to deal with outbreaks, GPEI has been successful at stopping nearly all outbreaks within 6 months of identification of the first case and outbreaks are not insurmountable barriers to success.

Decisions and Action Items:

- PSC to provide clarification on the “ownership” column of the risk registry and how to effectively engage when there is no government with which to work
- PSC to provide risk mitigation plans for areas lacking them
- WHO to apprise the POB of the outcomes of its upcoming Executive Board discussion on IHR and polio, and the subsequent actions planned by WHO
3. **GPEI process changes and recommendation on review of oversight and management of GPEI**

**Summary:**

The POB discussed ways to improve management and processes in an effort to be more transparent and inclusive and to address donor concerns articulated at the PPG. The board considered and approved three proposals:

1. Proposal to include donors in major decisions
2. Proposal to invite major donors to in-person POB meetings and facilitate PPG review of major issues
3. Proposal to increase transparency of POB process through decision papers and dissemination of minutes

A fourth proposal was discussed and tabled pending additional information:
4. Proposal to determine the scope and timing of a comprehensive review of the program’s oversight and strategic and operational management

**Discussion**

The first proposal establishes the principle of POB consultation with donors in major decisions that affect the overall direction of the program. Major decisions were defined as:

- Changes to interruption of transmission timelines.
- Major shifts in strategy.
- Changes to timelines for IPV introduction.
- Proposals on the Global Legacy Framework.
- Changes to annual budget or the overall US$ 5.5 billion budget envelope

Second, the board agreed to invite major donors to its in-person POB meetings and involving the PPG through opportunities by facilitating its review of major issues for the POB in advance of POB meetings.

Third, major decisions will be accompanied by decision papers, which will be shared with donors and other partners prior to the meetings to allow time for donor/partner review and comment. Board members pointed to the PPG’s supportive role in the past and felt that increased partner and donor involvement may also increase confidence in the program. Consistent with practices of most boards, the board will hold executive sessions, as needed (including regular phone calls).

The Chair introduced a fourth proposal for a comprehensive management review stemming from last fall’s IMB recommendations, with a scope and timing to be determined. Board members felt strongly that a management process review should not interfere with the focus on eradication efforts in 2014. BMGF will prepare a paper with proposed scope of the review based on these discussions.
Decisions and Action Items:
• Adopt the first three proposals of the oversight decision paper (see summary above), emphasizing especially the involvement of donors and partners in changes to eradication timelines and/or changes to the annual budget or the overall US$5.5B endgame budget envelope.
• BMGF will circulate paper with a full rationale and proposed scope of review based on these discussions by email

4. Approval of operations / finance plan for 2014

Summary:
The chair reported that there has been a reprioritization of SIA campaigns to focus efforts in endemic and neighboring high-risk countries. The Board will revisit the issue in April, 2014, to assess whether the SIA calendar is appropriate for the epidemiologic situation at that time and whether additional SIAs are required.

Participants noted that the program needs a deeper understanding of changes in Nigeria’s budget.

Decisions and Action Items:
• Revisit SIA calendar and budget in April, 2014

5. High-level advocacy plans for Pakistan and Nigeria

Summary:
The advocacy plan paper was briefly noted but due to time constraints, the chair recommended that the POB should review and send comments to BMGF.

Decisions and Action Items:
• Comments can be sent to BMGF via e-mail.

6. Other Business

Decisions and Action Items:
• Minutes will be posted on the GPEI Website
• Going forward, POB pre-read materials will be sent one full week before the meeting