Meeting Minutes of the Polio Oversight Board call

Friday, 27 February 2015
10:30-11:30am EST

POB Members on the call:
- Dr. Tom Frieden (CDC), Chair
- Dr. Margaret Chan (WHO)
- Dr. Chris Elias (BMGF)
- Mr. John Germ (Rotary)
- Dr. Tony Lake (UNICEF)

I. Consensus agenda
The POB adopted the following agenda items by consensus:
- POB Voting Procedures
- Polio Oversight Board Terms of Reference
- Strategy Committee Terms of Reference
- Eradication and Outbreak Management Group Terms of Reference
- Immunization Management Group Terms of Reference
- Legacy Management Group Terms of Reference
- Polio Advocacy and Communications Team Terms of Reference
- POB Routine Immunization Statement
- Finance and Accountability Committee Terms of Reference

Action Items:
1. The POB to put out a joint statement with GAVI about the GPEI’s role in strengthening immunization systems
2. Agency staff to identify dates for POB in-person meeting, potentially around WHA or UNGA

II. Pakistan and Afghanistan
PAKISTAN: The POB acknowledged critical factors for success in the country: security of campaigns, quality of campaigns, quality of routine immunization, all-of-government approach, with coordination through EOC, expansion of health camps concept, government commitment and efficiency, and sustainable financing. CDC will focus on working with BMGF to strengthen EOCs through the “non-polio window” of global health security.
BMGF reported on a recent trip to the region, noting strong and effective EMRO leadership, ongoing security concerns and a strategic shift in country from tracking the number of vaccinated children to tracking the chronically missed children. UNICEF reported on ongoing work with health camps where approximately 2.5 million adults and children are being targeted. In KP/FATA, health camps will also be integrated into a provincial government project called Alliance for Health. The POB agreed that real progress can be seen in Pakistan, but more needs to be done working through the key levers mentioned above, and strengthening federal and
provincial EOCs. CDC will work closely with WHO, establishing a more robust NSTOP program and building on lessons learned in Nigeria.

AFGHANISTAN: New government there appears to be off to a good start on polio eradication.

III. **Africa Outreach**

Going forward, poliovirus surveillance will be a top priority for the partnership, including surveillance for other VPDs. Acknowledging Nigeria’s two success stories (rapid control of an Ebola outbreak and six months without WPV cases); the POB agreed that the partnership cannot become complacent in Africa.

IV. **Finance**

The POB voiced observations about the financial big picture: we are approaching the midpoint of GPEI 2013-2018 strategic plan and there is a need to review the program’s financial requirements. The program is already beginning the mid-term review and plans to have a report for the POB by mid-year. Progress of the program in Pakistan will have a major impact on the long-term GPEI budget outlook. BMGF updated on the newly formed Finance and Accountability Committee (FAC). During the call, the FAC terms of reference were adopted by the board. The board came to an agreement that the Financial Management Team (FMT, which will be the day-to-day financial managing body) will be chaired by WHO and UNICEF, each for a term of one year on a rotating basis. WHO will start the rotation in 2015. It is expected that the WHO and UNICEF finance teams will continue to work closely together regardless of who holds the chair.

**Action Items:**

1. Strategy Committee to share FMT Terms of Reference after their review and approval
2. CDC to name a representative to FAC