

## **Meeting of the Polio Oversight Board (call)**

**Wednesday, 3 June 2015**

**10:30-12:00am EST**

### **Participants:**

Dr. Thomas Frieden (CDC, POB chair)

Dr. Chris Elias (BMGF)

Mr. John Germ (Rotary International)

Dr. Geeta Rao Gupta (UNICEF)

Dr. Anarfi Asamoah-Baah (WHO)

Dr. Hamid Jafari (WHO, SC Chair)

### **I. Opening Remarks**

- Welcome all agency heads and deputies.
- Consensus agenda item: Nigeria advocacy plans and September event was briefly mentioned, but a consensus vote was not conducted.

FOLLOW UP: Gain agreement by email consensus vote on GPEI September event in Nigeria.

### **II. Midterm Review and GPEI Finance**

#### **Mid Term Review:**

- Hamid Jafari provided an overview of the MTR process and progress.
- The key finding of the MTR is that the endgame strategic plan still captures the key strategic elements required to achieve poliovirus eradication, but there is an urgent need to re-focus priorities, strengthen implementation, and initiate some new tactics.
  - Linkage with routine immunization (RI) was highlighted, specifically that GPEI has so far set its own expectations for how it contributes to routine immunization (RI). Clarity is needed on how GVAP partners see polio fitting into the broader RI vision both currently as well as for legacy planning. Joint GPEI and GVAP accountability is needed, especially to ensure GVAP investments adequately leverage polio assets. Additional discussions are therefore required with Gavi and other partners to better leverage their investments a way forward, the Strategy Committee and the Finance and Accountability Committee (FAC) will present the findings and modeled financial scenarios during the Polio Partners Group (PPG) and FAC meetings on 12 June.
  - The Strategy Committee (SC) is planning a meeting with all management group chairs in July, where a plan will be shaped for implementation of MTR recommendations.
  - Further conversation is planned during the September 25<sup>th</sup> in-person POB meeting, looking at the most current epidemiologic situation and gain consensus on the most likely scenario.
  - In the event that more funds will be required (above \$5.5 billion); the POB will then be asked for their support to reach out to donors and stakeholders.
- Tom Frieden commented that the MTR has been well received by all, recognizing progress while identifying room for improvement. Two main focus issues remain for the partnership: getting over the finish line in Pakistan and Afghanistan as well as program funding in both the near term and long term

- Geeta Rao Gupta (UNICEF) posed the question about which scenario is being promoted as the most likely.
- The group agrees that Scenario 1 (Pakistan interrupts transmission in 2015) is possible but not the most likely. In September, the partnership will have a better understanding which scenario is most likely to happen. The Board agreed that pressure must be maintained on Pakistan and Afghanistan programs to finish in 2015 and prevent complacency. Every year the program does not eradicate, it costs the program \$800 million dollars.
- John Germ raised the issue of cost reduction and complacency in the countries.
- Tom Frieden highlighted his concern with the MTR's discussion and analysis of biocontainment (GAP III). He noted that the containment analysis was not granular and focused. CDC is willing to provide support, but WHO is urged to accelerate planning and focus.
- Hamid Jafari agreed that biocontainment efforts have to be accelerated.

### **Finance Update:**

- Chris Elias presented a comprehensive update on the GPEI finances. There is currently a gap of \$595 million dollars (FAC handout) for 2015, much of which results from late (Q3 and Q4) contributions from BMGF, high net worth individuals (HNI) and money released from Rotary International through the Polio Plus Committee. These are low risk pledges, and if all pledged and projected funds are received, the gap reduces to slightly over \$160 million. The FMT is currently working to clarify remaining potential gaps and to adjust for the usual annual GPEI underspends which will reduce this much further. Chris Elias also noted that there is still significant resource mobilization required to operationalize funding for the current 2013-2018 plan as well as raise the remaining support needed (approximately \$490 million out of a total \$5.5 billion).
- The new GPEI position (Program Advocacy and Communications Lead) based at WHO will be filled in June. The person will be responsible for coordination of resource mobilization efforts.
- John Germ posed the question of how much US contributions are included in the current FRR (~\$120million), Tom Frieden noted that not all US expenditures are credited in the formulation.
- Chris Elias updated the group on the FAC's plans to provide a quarterly report of the FRR to the POB, and an annual comprehensive report, which will capture all US and other partner contributions.
- Chris Elias also discussed the four financial scenarios derived from the midterm review (MTR). He pointed out that the goal post is consistent through all four: certification of a polio free world. Post-certification costs that need to be considered. John Germ pointed out that cost containment and focus of spending polio funds on eradication efforts are priorities. Geeta Rao Gupta and Hamid Jafari reassured that polio funds are being used for eradication efforts, and that RI is being supported by GPEI mainly through the time that staff spend on RI activities. In specific high risk areas RI activities are included in broader health interventions as a means to engage and access communities.
- Concerning how the POB would communicate the scenarios and the need for additional funds, Chris Elias outlined the preferred strategy for sharing the financial scenarios: with the major donors and PPG co-chairs on 5 June in preparation for the FAC meeting on 12 June, and with the PPG on 12 June only. The Board agreed, but cautioned Chris to be prepared to provide an explanation and answer questions during the PPG meeting.

### III. Endemic Countries

#### Pakistan:

- Tom Frieden noted that there is momentum in the country, which can be built upon. However, quality and security remain a concern. The vaccinator payment issue is urgent.
- Dr. Frieden's visit next week, as part of a WHO mission, is the only planned visit by Board members to the region.
- Chris Elias discussed the cost of delaying interruption of transmission and the importance of domestic financial contribution with the Pakistani health officials during discussions at WHA, they expect to hear details from Dr. Frieden during his travel to the country.
- WHO noted the need to maintain advocacy with the leadership in Pakistan and noted that the UN General Assembly (UNGA) meetings in September, and the Commonwealth Heads of Government Meeting (CHOGM) in November are opportunities for high-level advocacy. Others suggested heads of state (China, UAE) to help the effort. Chris Elias noted that Pakistan should be encouraged to ask China for assistance, as China is ready to provide help if asked.

FOLLOW UP: UNICEF to send update on health camps

#### Afghanistan:

- Tom Frieden raised the question if the newly appointed polio focus person, Dr. Stanekzai, is fully focused on polio. Hamid Jafari pointed out that he is motivated to play a lead role but needs additional national staff support and needs to be enabled by the Minister to spend more than 50 percent of his time on polio. WHO and UNICEF in the country are offering their support to the focal person.
- Tom Frieden asked for a coordinated approach for advocacy (as Nigeria recently did) and what the most effective way to continue engagement of the country leadership could be.
- Cross border issue: Hamid Jafari reported on the recent cross-border meeting, which took place on June 3<sup>rd</sup>. The Board pointed out the importance of cross border collaborations noting that the Afghan official visited the EOC in Pakistan, agreed on monthly bilateral video conferences and are keen to establish a similar Polio Control Room in Kabul.

#### IMB report:

- The Board discussed the IMB recommendations and agrees on the importance of the areas identified by the IMB for attention. The Board supported the recommendations while suggesting modifications to the specific suggestions: (1) to hold a global summit on missed children and (2) to hire a private contractor to conduct quality improvement assessments in Pakistan and Afghanistan.
- Global Summit: as the solutions to finding missed children will most likely be found locally, this discussion should be held at the country level with best practices being shared from global level to the implementation level for adaptation.
- Private sector quality improvement contractor: The IMB rightly highlights the need for quality improvement in key country programs. The Board agreed change was needed, and stressed a renewed focus on quality improvement, using evidence based decision making and utilizing real-time, improved quality data. Important lessons have been learned in this regard from the Nigerian

experience, and GPEI will engage with partners in country to support continued program improvement. These activities may use private sector contractors as appropriate to facilitate change.

FOLLOW UP – SC to provide feedback to IMB on recommendations

#### **IV. GPEI Leadership**

- WHO provided an update on the GPEI leadership change in December of 2015. Dr. Anarfi Asamoah-Baah conveyed Dr. Chan's request to involve the POB in the process specifically in:
  - finalizing the position description
  - encouraging qualified candidates to apply
  - being part of the selection panel
- WHO is planning to publish a public position announcement in July. A position description will be drafted and circulated to the POB for comments.
- Dr Asamoah-Baah conveyed that Dr Chan is open to the use of a search consultancy group to help in the process.
- The Board agreed unanimously that an overlap of at least two months between Dr. Jafari and the incoming Director is necessary.
- BMGF noted that the incoming Director should be focused on next steps in the eradication effort: legacy and biocontainment.

FOLLOW UP: WHO to send position description for GPEI Director to POB by June 19<sup>th</sup>.

#### **V. Final Discussion**

- The Chair thanked everybody for participation and their hard work since the last call.
- The next meeting of the Board will take place in New York City on September 25<sup>th</sup>. An interim call will be scheduled as needed. Dr. Frieden noted that the POB secretariat will finalize the September in-person meeting location and will share it with the Board.
- Dr. Frieden urged the group to share their advocacy plans in endemic countries in an effort to streamline and improve outreach. He asked the Board to share their travel and outreach plans in an open dialogue and open communication with all Board members.

FOLLOW UP: POB Secretariat to share location of in-person meeting in September.