

13 July 2016

Sir Liam Donaldson
Chair
Independent Monitoring Board

Dear Sir Liam

The IMB's October 2015 report "Now is the time for peak performance" was of great value in summarizing the programme's position, highlighting shortfalls and recommending course corrections. For your consideration as you prepare for the July 2016 meeting of the IMB, I attach the GPEI's full report to you on the programme's current status. This is in a slide deck format. I also enclose a full statement of the actions that have been taken in response to your last set of recommendations. We are detailing progress where it has occurred, but not shying away from the significant challenges that remain.

The programme's experience over the past five years has confirmed that stopping polio transmission is possible, however difficult the setting might be. The innovative strategies that defeated polio in India and Nigeria have been adapted and are showing positive results in both Afghanistan and Pakistan.

In Afghanistan, Emergency Operations Centres have now been established at the national level and in three critical regions. All components of the updated National Emergency Action Plan are in the process of implementation, including scaling up human resources in key low performing districts and provinces, and executing strategies to improve campaign performance. However, the programme continues to face both challenges of accessibility, and challenges in implementing high quality campaigns in some accessible areas (particularly where they are not government controlled). As a result there are high numbers of missed children, particularly as local conflict has intensified in the early part of 2016 in key areas of the east and south.

In Pakistan, the programme is implementing its National Emergency Action Plan and Technical Advisory Group recommendations to close remaining immunity gaps, with immediate actions identified for each provincial Emergency Operations Centre. The country programme reviews the performance of staff and documents accountability measures within the partnership on a monthly basis. Despite these efforts and clear programmatic improvements, environmental surveillance in 2016 has found virus in each of the major reservoir areas. Success in Pakistan is critically dependent on improving programme performance in Karachi and Northern Sindh, where programmatic improvements have lagged behind those achieved in the other major reservoirs.

It is nearly two years since Africa had a case of wild poliovirus. As a result, eradication could be certified in the region in 2017, although there is a need to close surveillance gaps in some countries and to make sure that supplementary immunization activities are of the highest quality.

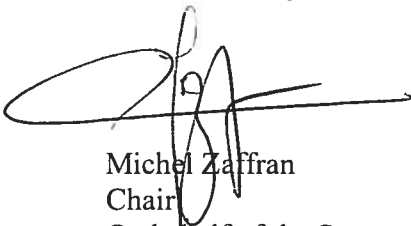
The programme is now managing multiple events and outbreaks of vaccine-derived poliovirus. These are detailed in the attached report. We have established an incident management system for each such event. When a type 2 vaccine-derived poliovirus is detected, an advisory committee is rapidly convened to advise the Director General of WHO on whether type 2 monovalent oral polio vaccine should be released from the global stockpile. Quality and timely outbreak response is critical – we have made progress in strengthening our systems and practices, but aspire to tighten these further.

The IMB does not oversee the trivalent to bivalent oral polio vaccine (tOPV-bOPV) switch, but you will be aware that this historic event took place from 17 April to 1 May 2016. In a globally coordinated effort, 155 countries and territories successfully stopped using tOPV, withdrawing the type two component of the oral polio vaccine from use. This part of the programme has experienced some challenges too, mainly because of major shortfalls in the amount of inactivated poliovirus vaccine (IPV) that manufacturers have been able to provide.

The GPEI has continued to strengthen coordination and accountability. Progress is being made in improving financial planning and transparency. We have recently issued a budget for 2016-19, against which we will regularly report. Some management challenges remain, such as identifying dedicated staff for specific roles, balancing the need to transition the programme whilst overcoming the final hurdles for eradication, and resolving financial gaps in a timely manner.

Thank you again for the crucial role that you play in this programme. We look forward to the meeting in London, and the opportunity to discuss the progress and challenges with you. If any further information would be of help to you and your colleagues, we will be happy to provide it.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'Michel Zaffran', written over a horizontal line.

Michel Zaffran
Chair
On behalf of the Strategy Committee