

Procurement strengthening tools



GLOBAL VPPEF 2023

CAPACITY DEVELOPMENT

KNOWLEDGE EXCHANGE



Strategic Vaccine Procurement Assessment Toolbox

A standardized methodology for governments to assess their own national vaccine procurement processes

Available at <u>unicef.org</u> UNICEF Supply Division



Strategic Vaccine Procurement e-learning course

e-course to guide users on how to identify & understand the strategic vaccine procurement cycle & processes to ensure sustainable access to affordable vaccines.

Available on Agora here.



Vaccine Procurement Practitioners Exchange Forum (VPPEF)

Country buyers & Partners Exchange good practices & expertise 9 Forums held since 2015

2020 eVPPEF (online)
Increasing demand from members & partners



Vaccine Procurement Practitioners Network (VPPN)

Online platform

Exchange
>45 countries represented
Knowledge sharing/
development - Monthly
webinar/ e-discussions



eCourse: Strategic vaccine procurement



5 - 6 hours learning time

Collaborative approach
(Authors + peer
reviewer process)

7 Modules:

- (1) Intro (2) VM (3) MI
- (4) Regulatory (5) FP&B (6) SVP (7) M&E

Launched: Q1 2023

Collaborative Approach

Content developed with multiple partners:

 CHAI, DCVMN, Gates Foundation, Gavi, the Vaccine Alliance, Government partners (Canada, DFID, Estonia, Norway), IFPMA, MSF, PATH, UNICEF SD (CC, HRC, MSDEU, MSFC, VC), WHO

Partners consulted:

- PAHO
- USAID
- World Bank

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Vaccine Procurement Practitioners Network (VPPN)

PURPOSE

To provide inputs and concrete recommendations that will guide on prioritizing efforts and resources as to achieve the goal of the VPPN "to serve as a platform for continuous exchange of theoretical and practical knowledge, joint learning and collaborative problem solving related to vaccine procurement in MICs & Gavi Transitioning Countries."

Announcements



Key messages broadcasted to all members.

VPPN's own Facebook page. All the latest postings on the network.

Timeline



Background information on the VPPN - its history, purpose. values, and partners.

About us



Members

important page! Connect with other members search. chat. email privately.

Discussions



This is a core knowledge sharing area for our community of practice. All previous VPPN Discussions are archived here.

Country **Profiles**



Information on VPPN country members, data & statistics. related discussions and relevant resources.



All VPPN resources can be searched here (Note: only **VPPN** resources are available in this search, the TechNet-21 Library menu

Library



option is a separated search function.)



Content searchable by key themes/ topics.

Videos

Catalogue of video presentations. including the Zoom recordings of the 2020 Knowledge Sharing Sessions/

Webinars.

Events



VPPEFs, Workshops, events posted by members.

Albums

Catalogue of photos.



How to join the VPPN



Invitation

An invitation to join the VPPN (and TechNet) was sent to your email

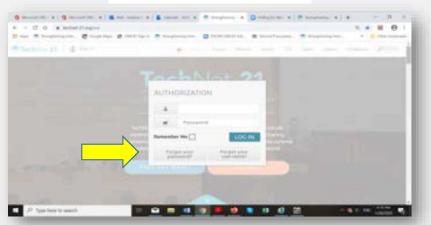


Registration.

Your email is your username



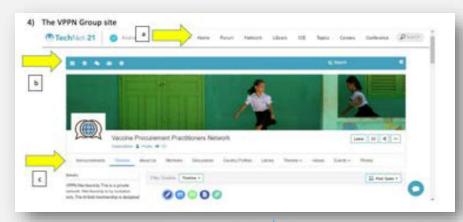
Click on "Forgot your password" to create a new password





Instructions

Please be sure to review the instructions in the two Quick Sheets handouts that will be shared: "How to Register and Manage Alerts" and "How to use the VPPN"









UNICEF resources



Useful resources	UNICEF.org
Annual Vaccine Industry Consultation	<u>link</u>
Contracts Awards	<u>link</u>
Emergency stockpile availability (OCV/ Meningococcal/YFV)	<u>link</u>
Strategic Tender Calendar	<u>link</u>
Supply Chain Dashboard	<u>link</u>
UNICEF Market Notes	<u>link</u>
UNICEF Product Menu	<u>link</u>
Vaccine Pricing data	<u>link</u>

The IFSP toolbox Overview











Toolbox objectives

- Make material available online for countries and partners to use
- Improve forecasting and planning of vaccines, related products and cold chain equipment
- Introduce a standard approach to capacity-building

Development approach



Develop strategies Develop and adapt material

Collect inputs from partners and pilot in countries

Update toolbox material

Strategies guiding the toolbox



Ensure establishment and institutionalization of government-led forecast teams



Establishment of quality processes for forecasting and coherence with budget planning



Standardize forecast methods and ensure data quality



Institutionalize forecast KPIs to monitor forecast accuracy and use



Invest in staff capacity building

Toolbox content

Coordination and establishment of forecast teams

Country cases and communication materials

Performance Monitoring and KPI description

Assessment tool

Training Resources

Forecast methodologies and selection of appropriate method

Supply planning and budgeting

The UNICEF Cervical Cancer Toolkit

UNICEF provides countries and partners access to a comprehensive range of affordable and quality-assured supplies for cervical cancer elimination programmes.



Cervical cancer is the fourth most common cancer in women, affecting over half a million and killing more than 300,000 each year.

- UNICEF has developed a "Cervical Cancer Toolkit".
- The toolkit covers HPV vaccines, HPV diagnostics, portable treatment devices for cervical pre-cancer available through UNICEF.
- For more information, please visit <u>Cervical-cancer-toolkit-January-2023.pdf</u> (unicef.org)







Standard pre-financing "VII Subscription"

Addresses recurring cashflow delays - agreed VII ceiling

- Formal access to VII Capital Fund ("credit card like mechanism") allocated country ceiling accompanied by technical assistance as part of a VII Plan
- Countries pay back after delivery of goods and Statement of Account ("SoA")
- Scope: All commodities that can be procured via SD

"Ad-hoc" pre-financing

Addresses non-recurring temporary disbursement delays – approval on a case-by-case basis

- Delayed self-funded Country disbursement, grants or multi-lateral arrangement (e.g., World Bank loan)
- · Scope: All commodities that can be procured via SD

Providing financial backing for Special Contracts

- UNICEF negotiates firm commitments with suppliers employing non-standard contractual terms.
 Objectives of individual special contracts vary depending on UNICEF's specific requirement and prevailing market conditions, include:
 - Improved pricing (and therefore savings)
 - · Accelerated or guaranteed availability of supplies
 - Market shaping

Examples of key VII achievements:

- \$650m throughput achieved in 2021 in response to the Covid crisis.
- \$111m financing deployed in 2022 to secure and accelerate the procurement of 2.5m cartons of RUTF in the context of the nutrition crisis.

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Middle Income Countries Financing Facility (MFF)

- Targeted at Middle Income Countries ("MICs") that do not typically receive donor support (anymore) and have lagged in the introduction and scale-up of vaccines and other essential health supplies, leading to avoidable mortality and morbidity.
- To address these barriers and global inequities, UNICEF has launched the MFF which will allow these countries to benefit from UNICEF's procurement scale, access, market expertise and affordable pricing. The MFF builds on the successful experience of the VII.
- MFF offers both (hybrid) *pre-financing and special contracting* (as appropriate) modalities to support access, for *larger amounts* compared to previously available financing tools, including to support *multi-year firm contracting*.
- Examples of how countries have benefitted from activities which are supported under the MFF are as follows:
 - Cash-flow delays Country pre-financings have accelerated the delivery of supplies to countries by typically between 3 to 6 months (budget release delays were backed-up by country repayment commitments).
 - Procurement law restrictions Addressing countries inability to provide advance payment due to national procurement law restrictions: As a pilot transaction with Indonesia, UNICEF was able to waive (pre-finance) 70% of the advance payment obligation based on a repayment commitment from the country at the time of delivery which secured timely access to PCV via placement of POs with suppliers and enabled the introduction scale up in the country during 2022. Indonesia is otherwise not able to meet UNICEF's standard advance payment requirement given their national procurement law restrictions.
 - ➤ Market shaping Special contracts have resulted in accelerated or guaranteed availability of supplies, reduced lead times, and improved pricing. HPV is an example, where multi-year commitments have resulted in the ability to negotiate 11-13% price reductions. Aggregated demand from multiple MICs and long-term forecast commitments may support negotiation of price reductions for other vaccines as well.

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PSC: Contact information

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- Mathias Thomann-Arenhorst, Finance Specialist, <u>mthomannarenhorst@unicef.org</u>
- Claire Frijs-Madsen, Finance Specialist, cfrijsmadsen@unicef.org



Gavi MICs Approach: Overview

The MICs Approach addresses key threats to equity and sustainability

Problem statement

Objectives



MICs are lagging behind in introducing critical vaccines, presenting a threat to inter-country equity

Drive the sustainable introduction of PCV, rotavirus, and HPV vaccines in former- and select never-Gavi eligible countries



Risk of backsliding, heightened by the pandemic, exacerbates intra-country inequities and jeopardises the legacy of Gavi investments

Prevent and mitigate backsliding in vaccine coverage in former-Gavi eligible countries



The MICs Approach is guided by explicit outcomes, reflecting its clear focus on results



Mitigating backsliding

90% of former-Gavi countries with >90% pre-COVID DTP3 coverage restore coverage back above this threshold & remaining countries arrest the decline and begin an upward trajectory



Reducing zero-dose

Reduce the number of zero-dose children by **230,000** in former-Gavi countries



New vaccine introductions

Introduce 8-10 new vaccines and reach 4M-6M children/adolescents



Gavi aims to achieve the MICs Approach objectives through a clear theory of change

Intervention areas

Foundational building blocks

Targeted & catalytic tools

Intermediate outcomes

Political commitment to & accountability for equitable immunisation at national and subnational levels

Institutional capacities to plan and deliver sustained, equitable immunisation programmes, as a platform for PHC delivery

Sufficient, sustained, and reliable domestic resources for immunisation programmes

Community demand for & confidence in vaccines and immunisation services, including among missed communities

Zero-dose children identified and targeted

Routine immunisation services restored and reinforced to catch up missed children

Sustainable access to PCV, rotavirus and HPV vaccines*

Long-term outcomes

Driving new vaccine introductions

PCV, rotavirus and HPV vaccines sustainably introduced in national immunisation programmes

Preventing and mitigating backsliding

Prevent
Immunisation system performance is
maintained, sustainable, and resilient to
shocks and stresses

Mitigate

Coverage rates restored, including by reaching zero-dose children

The Foundational Building Blocks Addressing systemic issues across middle-income countries

Gavi works hand-in-hand with core and expanded partners to strengthen the enabling environment for new vaccine introductions and sustainable immunisation programmes, with efforts including:



Providing regional and multi-country technical assistance



Supporting peer-to-peer learning platforms

(Peer-to-peer country knowledge exchange platform, the <u>Linked Immunisation Action Network</u>, builds on the pre-existing Learning Network for Countries in Transition (LNCT), but now includes all MICs-eligible countries and is dedicated towards supporting countries to achieve the MICs Approach objectives



Galvanising political commitment



Targeted and Catalytic Tools

Targeted engagement with countries interested in or actively planning new vaccine introductions



Dedicated in-country technical assistance via relevant core and expanded partners



Flexible funding to cover time-limited, one-off costs related to new vaccine introductions



Vaccine catalytic financing for half of the first birth (or target) cohort



Assistance accessing **pooled procurement** as a mechanism to support sustainable access to new vaccines including sustainable prices



Countries and economies eligible under the MICs Approach as of July 2022

Former-0	Gavi eligible	countries	Never-Gavi eligible countries*			
Angola Armenia Azerbaijan Bhutan Bolivia Cuba Georgia	Guyana Honduras Indonesia Kiribati Moldova Mongolia Nicaragua	Sri Lanka Timor-Leste Ukraine Uzbekistan Viet Nam	Algeria Belize Cabo Verde Dominica Egypt El Salvador Eswatini Fiji Grenada Iran	Kosovo Lebanon Maldives Marshall Islands Micronesia Morocco Occupied Palestinian territory Philippines	Saint Lucia Saint Vincent and the Grenadines Samoa Tonga Tunisia Tuvalu Vanuatu Venezuela	



a World Bank classification

Summary of MICs Approach support modalities

Intervention area	MICs Approach objective		Support available	Type of support	Recipient types	
	Backsliding	NVIs				
Foundational Building Blocks		AdvocacyRegional and multi-country initiativesP2P knowledge sharing platform	Regional and global level initiatives	Core and expanded partners		
		✓	Country-specific technical assistance	Country-specific support to support NVIs	Core and expanded partners, via countries	
		✓	Flexible, one-off support for new vaccine introduction costs	Country-specific support to support NVIs	Countries and their implementing partners	
Country specific tools		✓	Innovative Financing Mechanism	Support to UNICEF SD for financing mechanism	UNICEF SD	
		✓	Vaccine Catalytic Financing	Start up vaccine financing for countries, equivalent to half of the first target cohort	Countries via UNICEF SD or PAHO RF	
	✓		Targeted Interventions	Country-specific support to mitigate backsliding	Countries and their implementing partners	
Fragility			Vaccine costs for fragile MICs	Time-limited routine vaccine costs for countries and associated essential logistics support	Countries via UNICEF SD or PAHO RF	
			Technical assistance for fragile MICs	Essential technical assistance from partners	Core and expanded partners	





Thank you

Information on the Gavi MICs Approach is available online:

<u>Gavi's approach to engaging with Middle Income Countries</u>

Market Intelligence – WHO resources

Johanna Fihman Technical Officer, Global Access, WHO



Expanded global view

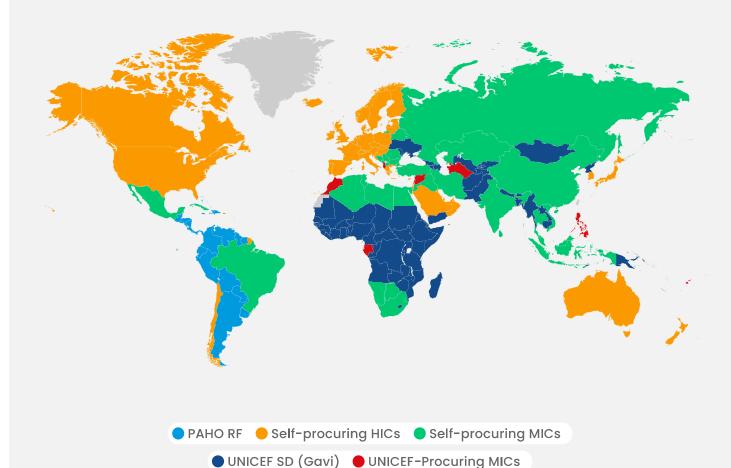
Vaccine supply is planned and distributed to serve a **global market** – consumption in one country impacts others

WHO aims to provide visibility on:

- All vaccines independent of global funding schemes
- All countries independent of procurement method
- All suppliers independent of PQ status of their products
- All payors independent of the public or private status
- All populations independent of recommendation for use







Data is collected annually through the WHO/UNICEF JRF

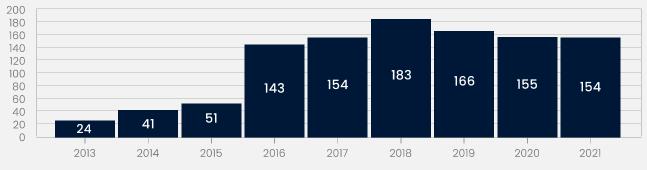
- Countries report vaccine purchases through the WHO UNICEF Joint Reporting Form
- It includes questions on products, volumes, procurement mechanism, contract length and prices





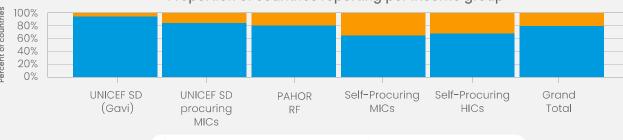
The level of reporting has slightly decreased since the C-19 pandemic and introduction of e-JRF





Complete reporting

Proportion of countries reporting per income group



Complete reporting in 2021 Did not report in 2021

A peer-to-peer platform is available on WHO website: MI4A

MI4A vaccine purchase database

- Contains information on vaccines purchased, volumes, price, procurement mechanism
- Country name is anonymized to respect confidentiality

MI4A Full Product List

 Contains list of all available vaccine available for procurement regardless of their prequalification status







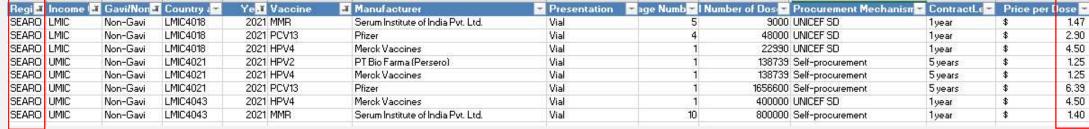
Vaccine Purchase Database Countries can access the information online







- Information can be filtered by region, by income group and other criteria and allows for comparison of prices paid by different countries
- <u>Example</u> below shows how PCV prices paid in SEARO compares to other self procuring MICs in other regions



Regi 🚾	Income 🗔	Gavi/Non-L	Country are	Ye-I	Vaccine	- Manufacturer	 Presentation 	age Numb	I Number of Dos	Procurement Mechanism -	ContractLe	Price pe	r Dose 🛭
WPRO	LMIC	Non-Gavi	LMIC4003	2021	PCV13	Pfizer	Vial	4	7000000	Self-procurement	1year	\$	1.95
SEARO	UMIC	Non-Gavi	LMIC4021	2021	PCV13	Pfizer	Vial		1 1656600	Self-procurement	5 years	\$	6.39
AFRO	UMIC	Non-Gavi	UMIC4046	2021	PCV13	Pfizer	Pre-filled syringe		1 3399030	Self-procurement	3 years	\$	16.56
EMRO	LMIC	Non-Gavi	LMIC4039	2021	PCV10	GlaxoSmithKline Biologicals SA	Vial		1 680000	Self-procurement	3 years	\$	16.80
EURO	UMIC	Non-Gavi	UMIC4041	2021	PCV13	Pfizer	Pre-filled syringe		1 3308725	Self-procurement	2 years	\$	19.59
EURO	UMIC	Non-Gavi	UMIC4041	2021	PCV13	Pfizer	Pre-filled syringe		1 3308725	Self-procurement	2 years	\$	19.59
EURO	UMIC	Non-Gavi	UMIC4021	2021	PCV10	GlaxoSmithKline Biologicals SA	Pre-filled syringe		1 11905	Self-procurement	1year	\$	21.00
EURO	UMIC	Non-Gavi	UMIC4036	2021	PCV13	Pfizer	Pre-filled syringe		1 958360	Self-procurement	1year	\$	24.37
EURO	UMIC	Non-Gavi	UMIC4039	2021	PCV13	Pfizer	Pre-filled syringe		1 400	Self-procurement	3 years	\$	25.69
EURO	UMIC	Non-Gavi	UMIC4020	2021	PCV10	GlaxoSmithKline Biologicals SA	Pre-filled syringe		1 320000	Self-procurement	2 years	\$	35.38
EURO	UMIC	Non-Gavi	UMIC4040	2021	PCV13	Pfizer	Pre-filled syringe		1 110000	Self-procurement	3 years	\$	40.85

The Full Product List provides information on all available products





- The MI4A Products List provides a snapshot overview of vaccine products available for procurement – irrespective of their WHO prequalification status
- This list reflects information reported by countries through the 2022 Joint Reporting Form (JRF) and is supplemented / amended with available information gathered through separate consultations



The MHA Products List provides a snapshot overview of vaccine products available for procurement - irrespective of their WHO pregualification status - as of August 2022

This list reflects information reported by countries through the 2022 Joint Reporting Form (IRF) and is supplemented / emended with available information gathered through separate consultations. As part of the ARA project, WHO conducts in-depth global market studies where the list of available vacaines can be considered comprehensive and up to date. Studies conducted so far include BCO, DE Frantishing, measles-containing, meningococcol, NPV, and pneumococcol vacaines. For all the other vacaines it should be noted that this list may not be complete and may be missing some products whose availability is not documented through public reported data and sources.

For reference the list of WHO Prequalified viscines is available on the WHO website. https://www.who.int/immunication_standards/viscine_quality/PQ_viscine_fist_en/en/

For additional information please contact M44@who int

Section	- Name of State	Mendeman	The Committee of the Co
Arthrax	No	Kapakh	10 Y. pestis EV line NI/ES attenuated (yoghilded)
Arthras.	760	Ministry of Defense, Russia	40
BCG	No	Administración Nacional de Laboratorios e Institutos de Salud	10
BCG:	No	Administración Nacional de Laboratorios e Institutos de Salud	20
BCG .	Yes	Al Vaccines A/S	18 BCG Vaccine (former SSI - Statens Serum Institut)
BCQ .	No	Al Vaccines A/S	20 BCG vaccine (former SS) - Statens Serum Institut)
BCG .	No	BCG Vessine Laboratory, Chennel	10
BCG :	No	BCG Varcine Laboratory, Chennal	20
80G ·	No	Biomed Lutilin -	10 Anotubercie vaccine (Socrepionia przeciwgrutiicza)
90G	No	BioVec	26-BOG VACCINE SSI ID
800	Yes	But Bip - National Center of Infectious and Parasitic Diseases Ltd.	10 BCG-Veccine
BCG	Yes	Bul Bio - National Center of Infectious and Parasitic Diseases Ltd.	20 BCG Vaccine
BCG	No	Drengdu Institute of Biological Products Co. 2kd	5 BCG Vaccine for Intrademal Injection - 0.25mg
80G	No	Fundação Atquipho de Paiva	10 BCG vaccine
BCG .	Tvo :	GreenSignal Bio Pharma Limited	10' BCG vaccine 10 (Freeze Dried)
800	fea	GreenSignal 84s Pharma Limited	20 BCG vective (Freeze Dried) - Intradermal
805	No	ImmunoSiciogy Dtd	T-Biovax
BCG .	No	Institut Pasteur de Tunis	30 BCG vaccine, freeze-dried - Pasteur 1178 P2 strain
807	No.	institut finetois inne	- W. Lucetilland & F. C. Location

Leveraging market intelligence 114

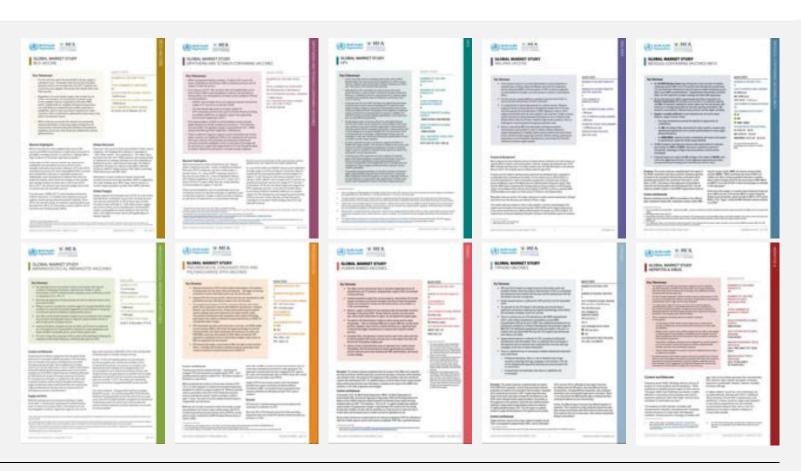
Ten Global Market Studies performed so far covering key vaccines





MI4A Market Studies

- Meningococcal meningitis
- Pneumococcal
- Human rabies
- Typhoid
- Hepatitis A
- BCG
- D&T containing
- HPV
- Measles containing
- Malaria



Leveraging market intelligence



Leveraging market intelligence



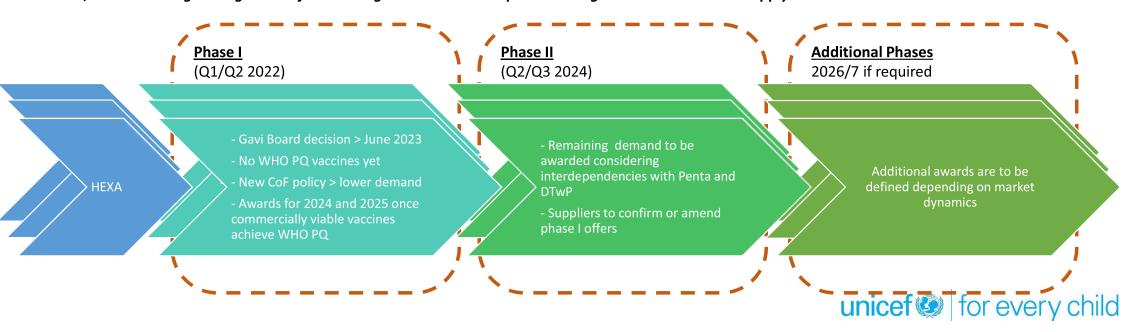
Hexavalent & DTwP-containing tender recap

The whole-cell Pertussis Hexavalent vaccine is a combination of whole cell Pentavalent and IPV vaccine, based on a 4-dose immunization schedule versus a combination schedule of 3-dose Penta + 1-dose DTwP booster + 2-dose IPV.

In November 2018, the Gavi Board approved in-principle support for Hexavalent, subject to (i) a vaccine being licensed, (ii) recommended for use by WHO, (iii) WHO prequalified, and (iv) with met market attributes met that support its successful implementation.

In 2022, considering that the above conditions were met or expected to be met, Gavi was planning to request the Board to open a funding window for Hexavalent. However, Gavi Board postponed such decision to June 2023.

In Q1 2022, UNICEF launched a multi-phase DTwP-containing tender to proceed with awards for DTwP, Pentavalent and Hexavalent for the period 2023-2027, while allowing management of cross-antigen demand development during the introduction and supply transition towards hexavalent.



Hexavalent updates & impact moving forward

- Gavi Board approval of Hexavalent expected in June 2023:
 - Followed by program implementation and update of demand scenarios
 - First country applications expected in Q3/Q4 2023
 - Commencement of supply expected in 2024
- DTwP booster 2YL will be moving forward. Timing of implementation to be decided with partners.
- Hexavalent vaccine pipeline:
 - Manufacturer A achieved WHO PQ in Q4 2022 but decided to discontinue production plans and vaccine was delisted
 - Manufacturer B expected to achieve WHO PQ in Q3/Q4 2023, available supply in 2024
 - Manufacturer C and D expected to achieve WHO PQ in 29 supply in 2025
 - Manufacturer E and F expected to achieve WHO PQ b supply in 2027
- UNICEF considering awards for supply in 2024 -2025 based of commercially viable vaccines aligned with tender objectives for:
 - Gavi demand
 - Non-Gavi demand (MICs)
- Phase II award strategy considering Gavi decision, timing of WHO PQ and demand scenarios
- Publication of DTwP-containing market note in advance of phase II of the tender

Countries are encouraged to share information on hexavalent plans, including indicative switching time and demand forecasts!

Timing of WHO PQ of Hexa vaccines

Hexa demand scenarios and impact on Penta / DTwP

Cluding time and asts!

Timing and Award Strategy for Phase II of Tender

