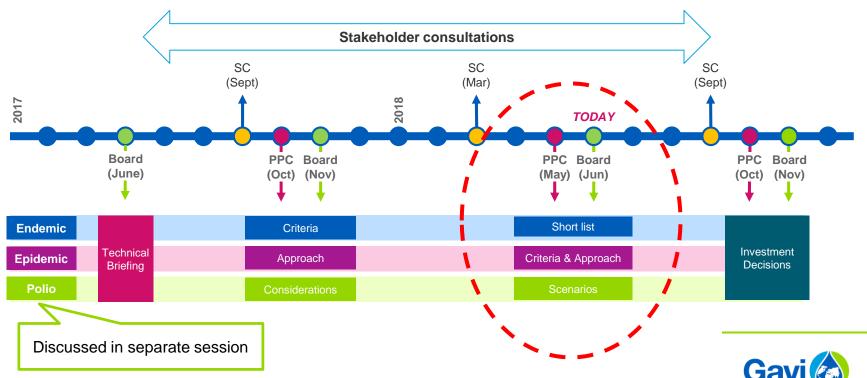
# VACCINE INVESTMENT STRATEGY: SHORT LIST

BOARD MEETING
Wilson Mok
6-7 June 2018, Geneva, Switzerland



## VIS 2018 timeline and process



# Evaluation criteria and indicators for vaccines for endemic disease prevention

	Criteria	Indicators		Criteria	Indicators
Ranking criteria:	Health impact	Total future deaths averted 2020-2035, and per 100,000 vaccinated  Total future cases averted 2020-2035, and per 100,000 vaccinated	Secondary criteria:	Other impact	Total U5 deaths averted 2020-2035, and per 100,000 vaccinated  Total DALYs averted 2020-2035, and per 100,000 vaccinated  Vaccine procurement cost per DALY averted
				Gavi comparative advantage	Degree of vaccine market challenges  Potential for Gavi support to catalyse additional investment
	Value for money	Vaccine procurement cost per death averted  Vaccine procurement cost per case averted		Implementation feasibility	Ease of supply chain integration  Need for health care worker behaviour change  Feasibility of vaccination time point
	Equity and social	Disproportionate impact of disease on vulnerable groups			Acceptability in target population Long-term financial implications
	protection impact	Special benefits of vaccination for women and girls		Alternate interventions	Optimal use of current and future alternative interventions (prevention and treatment)
	Economic impact	Direct medical cost averted Indirect cost averted		Broader health system benefits	No specific indicator – evaluated case-by-case
	Global health security impact	Epidemic potential of disease	S:	Vaccine cost	Total procurement cost to Gavi and countries, 2020-2035
		Impact of vaccination on antimicrobial resistance (AMR)	Financial plication	Vaccine cost Operational cost Additional	Incremental in-country operational costs per vaccinated person
	3		rii iin pi	implementation costs	Additional costs for introduction

## Evaluation of vaccines conducted consultatively with technical partners and in-country stakeholders

### **Demand Forecasting**

- Vaccine products
- Vaccination strategy
- Schedule/dosing
- Delivery strategy
- Target population
- Country introduction
- Coverage

### **Impact Modelling**

- Burden of disease
- Case fatality rate
- Efficacy
- Duration of protection

### **Price Forecasting**

- Products
- Supplier projections
- Price projections

### Other quant. analyses

- Procurement cost
- Operational costs
- Value for money
- **Economic impact:** cost of illness
- Global burden of disease

### Qualitative analyses

- Epidemic potential
- Impact on AMR
- Implementation feasibility
- Vaccination policy
- Other qualitative input

BILL&MELINDA GATES foundation





















University of Glasgow University











# Board consultations informed prioritisation methodology



## Shortlisting approach

Supportive of having multiple options



#### Ranking criteria

Health impact: 40% Value for money: 20% Equity: 15%

Economic impact: 10% Global health security: 15%

## Secondary criteria

Consensus to use to adjust ranking



## **Existing** investments

Mixed opinion on prioritising expansion of existing investments over new ones

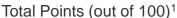


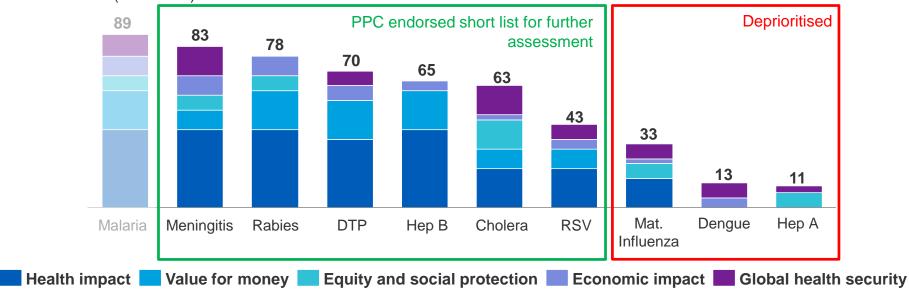
#### Total vs. relative

Preference for total impact vs. per 100k vaccinated



## Ranking based on Board member criteria weighting





<sup>1.</sup> Maximum 40pts for health impact (30pts for total deaths averted, 10pts for deaths averted per 100k), 20pts for value for money (cost per death averted), 15pts for equity and social protection impact, 10pts for economic impact and 15pts for global health security

Note: Malaria not up for investment decision. Used as comparator with Health impact and economic impact based on high-level estimates



# Four questions guide the assessment of potential investments in epidemic preparedness and response

Disease Risk & Burden

1. Is the epidemic potential of disease sufficient to prioritise a stockpile or similar investment?

Vaccine Impact & Feasibility

2. Would the vaccine be feasible to use and impactful as part of epidemic preparedness and response?

Fit for Gavi & Partners 3. What is Gavi's comparative advantage and how can Gavi's expertise contribute to the funding and delivery of this vaccine?

Financial Implications

4. What is the appropriate scale of the stockpile (or related intervention) and what would be the financial implications of an investment?



# 'Living assessments' will be developed for relevant vaccines until an investment case is needed

TRIGGER

WHO guidance (e.g. PDVAC, R&D Blueprint)

Preliminary safety and immunogenicity data (Ph2a/b)

Pathway to licensure in short term, public health need or updated WHO recommendation

**ACTIVITY** 

Identification of vaccines for consideration
For potential future assessment

'Living Assessment'

Understanding of disease, status of vaccine R&D, any potential Gavi role

Investment Case

Complete assessment, with financial implications and investment recommendation

PPC & Board Investment Decision (part of VIS or separately)

VACCINES UNDER CONSIDERATION (to be refreshed) Examples from WHO R&D Blueprint priority pathogens: Lassa fever, MERS, Nipah, Rift Valley Fever, etc.

Indicative list:

Hepatitis E

Ebola 2<sup>nd</sup> gen

Chikungunya

Zika

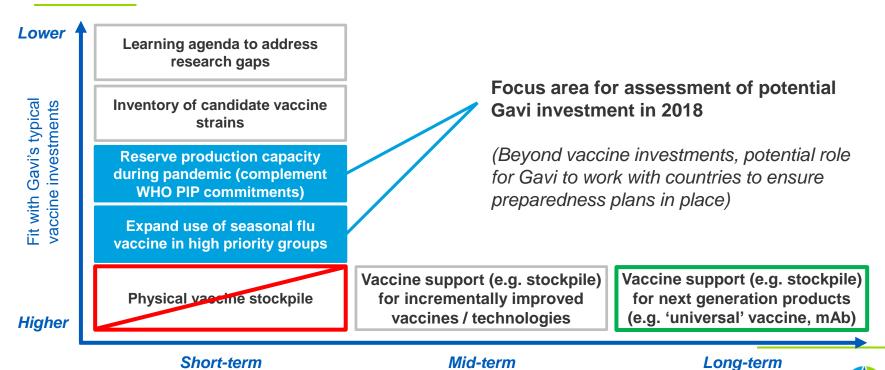
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Pandemic Flu

Brought to PPC & Board Oct/Nov 2018



# Several options to support pandemic flu preparedness are emerging as most suitable for Gavi to consider





## Next steps for October/November 2018 PPC/Board

## Programme design

- Programme / support options
- Implementation requirements and feasibility

## Financial implications

- Procurement costs (Gavi and countries)
- Operational costs, including for new platforms
- Financial implications for countries

#### Consultations

- · In-country, technical partners, experts, Board
- Vaccine preferences, programme design, implementation

## Portfolio considerations

- Synergies and trade-offs across potential investments and with current portfolio
- Alignment / implications for Gavi's current model
- Continue linking with ongoing 5.0 development

## FOR DECISION: New vaccine





- Shortlisted vaccines for endemic disease prevention
- Pandemic influenza
- IPV post-2020



### Recommendation

The Gavi Alliance Programme and Policy Committee recommends to the Gavi Alliance Board that it:

- a) <u>Approve</u> narrowing the choice of possible vaccine investment options for further analysis within the endemic disease prevention category of the Vaccine Investment Strategy 2018 to meningitis (multivalent conjugate); hepatitis B birth dose; cholera; DTP boosters; RSV; rabies;
- **b) Approve** the evaluation criteria for potential new investments in vaccines for epidemic preparedness and response and the approach for applying the criteria towards living assessments and investment cases as further described in Figures 2 and 3;
- **c)** Request the Secretariat, in consultation with WHO and other experts, to develop an investment case for Gavi to support pandemic influenza preparedness for PPC and Board review.

## Thank you



