VACCINE INVESTMENT STRATEGY: METHODOLOGY

BOARD MEETING

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29-30 November 2017, Vientiane, Lao PDR



Overview

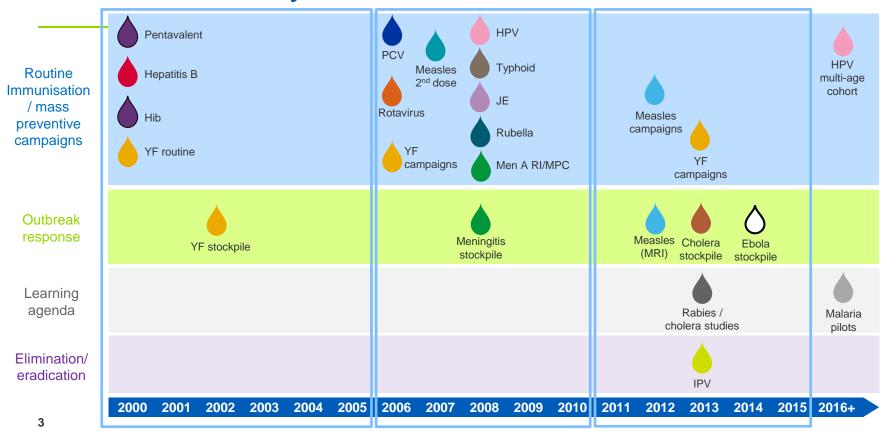
- VIS process
- Vaccine candidates
- Evaluation criteria for endemic disease vaccines

FOR DECISION

- Analyses and shortlisting
- Vaccines for epidemic preparedness
- IPV post-eradication
- Longer-term priorities
- Next steps in 2018

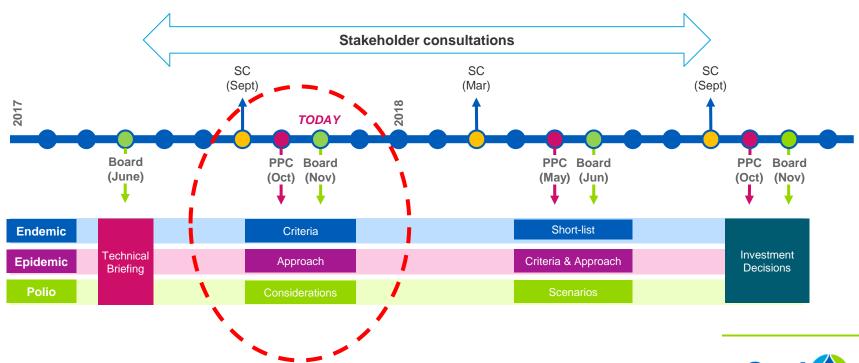


Gavi's vaccine portfolio has diversified to include investments beyond routine immunisation



Year of investment decision

VIS is an evidence-driven, consultative process to identify new vaccine opportunities and priorities





20 diverse candidates require a differentiated evaluation approach

	Link to current investment	New disease area
Endemic Disease Prevention	 Diphtheria Tetanus Pertussis Hepatitis B Oral cholera vaccine Meningitis C, Y, W, X Rabies Rabies Ig/mAb Malaria 	Hepatitis ADengueInfluenzaRSVRSV mAb
Epidemic Preparedness	• Ebola	ChikungunyaZikaPandemic influenzaHepatitis E
	 IPV (post-2020) 	

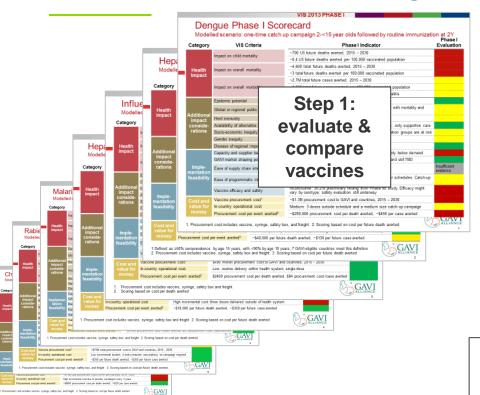


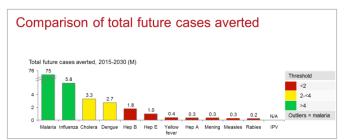


Criteria to evaluate vaccines for endemic disease control through planned/routine immunisation

	Evaluation Criteria	Draft Indicators
1	Health impact	Future deaths and cases averted
	Economic impact	Financial risk protection
	Equity and social protection impact	Gender, wealth, geography
	Global health security impact incl. AMR	Epidemic potential, antimicrobial resistance (AMR)
	Value for money	Cost per death and case averted
Secondary criteria	Other impact	U5 deaths averted, DALYs averted, cost per DALY averted
	Gavi comparative advantage	Market shaping need and catalytic effect
	Broader health systems benefits	Opportunity to strengthen health system or vaccination time point
	Implementation feasibility	Ease of supply chain integration, health care worker behaviour change, feasibility of vaccination time point, need for demand promotion
	Alternate interventions	Current and future alternative interventions
Secondary criteria Cost	Vaccine cost	Procurement cost
	Operational cost	Operational cost
	Additional implementation cost	Surveillance, technical assistance, etc.
	Broader health systems benefits Implementation feasibility Alternate interventions Vaccine cost Operational cost	Opportunity to strengthen health system or vaccination time point Ease of supply chain integration, health care worker behaviour chan feasibility of vaccination time point, need for demand promotion Current and future alternative interventions Procurement cost Operational cost

Following vaccine analyses, consultations to determine criteria weighting, options for PPC





Step 2: Consultations on shortlisting "vaccines that are very difficult to implement should not be prioritised" "vaccines with AMR impact should get extra 'points"

Shortlist A Shortlist B Shortlist C

Step 3: Options for PPC review 1. 2.

3.

4. ...

5.

1.

2. 3

4.

5.

1. 2. 3. 4.

Ongoing vaccine assessments in close cooperation with technical partners

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 quantitative analysis

- Vaccine cost projections
- Operational costs
- Value for money
- Economic Impact: cost of illness, financial risk protection

BILL & MELINDA GATES foundation















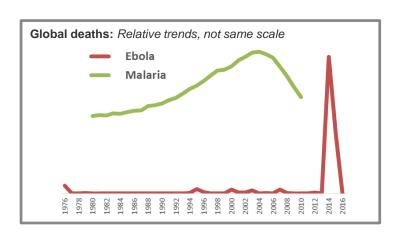








Unpredictability of epidemic diseases necessitates tailored evaluation criteria



Unpredictable nature of disease make vaccine impact projections uncertain

PPC guidance:

- Present criteria + review process at May/June PPC and Board
- Pre-licensure vaccines: not Gavi's mandate to fund, noting Board can take exceptional decisions as required (e.g., Ebola)
- All vaccines assessed case by case, including those funded through CEPI or other initiatives



Gavi's role in polio eradication post-2020

GLOBAL
Gavi supports IPV CERTIFICATION with funding from the Global Polio Global Polio Global Polio ERADICATION Stockpiles, etc.

Eradication Initiative

(GPEI)

GPEI sunset

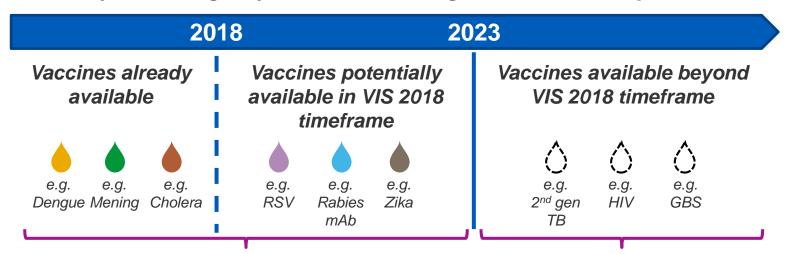
Approach:

- Review value of IPV as 'global public good'
- Develop scenarios for application of policies for IPV support (for guidance June 2018)
- Consider Gavi role in hexavalent and potentially other polio investments
- Investment decisions Nov 2018 Board



Need for longer-term view in light of vaccine development timelines

Gavi's 5-year strategic cycle sits within longer vaccine development timelines



Scope of vaccines under consideration for current VIS

Potential future vaccine priorities



Next steps 2018

For June 2018 Board

Endemic disease prevention

- Finalise indicators
- Consultations on criteria weighting and application
- Vaccine assessments, including modelling

FOR DECISION: Shortlist of vaccines for endemic disease prevention

Epidemic prepared-ness

Expert consultations to refine criteria

FOR DECISION: Evaluation criteria and approach for epidemic preparedness vaccines

Polio eradication

- Update situational analysis: timelines, supply, hexa
- IPV policy/financing considerations and options

FOR GUIDANCE: IPV scenarios

For Nov 2018 Board

- Updated and more indepth analyses
- Interdependencies and trade-offs in investments across categories

FOR DECISION

New vaccine investments



Recommendation

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

- a) Approve the evaluation criteria for potential new investments in vaccines and other immunisation products primarily intended for endemic disease prevention; these include ranking criteria (health impact, economic impact, equity and social protection impact, global health security impact, and value for money), secondary criteria (other impact, Gavi's comparative advantage, broader health systems benefits, implementation feasibility, and alternate interventions) and cost criteria (vaccine cost, operational cost, and additional implementation costs) as further described in Table 1 and Section 4 of Doc 07 to the PPC [as included in Annex C to Doc 12 to the Board];
- **b)** Request the Secretariat, in consultation with WHO and other experts, to develop evaluation criteria for potential new investments in vaccines for epidemic response for PPC review and Board approval.

THANK YOU



