COVID-19: VACCINE DEVELOPMENT, ACCESS AND DELIVERY

BOARD MEETING
Aurélia Nguyen
24-25 June 2020, Virtual Meeting
Agenda

- Access to COVID-19 Tools Accelerator (ACT-A)
- COVID-19 Vaccines Global Access (COVAX) Facility
- Gavi COVAX Advance Market Commitment (AMC)
- Considerations for delivery-at-scale of future COVID-19 vaccines
- Cold chain capacity needs for COVID-19 vaccines
ACT- Accelerator Vaccine Pillar

Facilitation Council Group

Access to COVID-19 Tools Accelerator (ACT-A)

Therapeutics Pillar

Diagnostics Pillar

Vaccine Pillar

WHO

UNITAID (co-convener)

Global Fund (co-convener)

Gavi (co-convener)

CEPI (co-convener)

Development & Manufacturing
Led by CEPI, with industry

Procurement and delivery at scale
Led by Gavi

Policy and allocation
Led by WHO

COVAX Facility

COVAX Coordination Meeting (CCM)

Vaccine Pillar

Board meeting 24-25 June 2020

Health systems strengthening among many other organisations
The Vaccine pillar of the ACT-A takes end-to-end view from R&D to delivery

COVAX Facility open to all countries and all COVID-19 vaccines
- CEPI portfolio already 9 vaccines but need to build inventory
- Currently 2nd call for proposal for more candidates
The COVID-19 Vaccine Global Access (COVAX) Facility enables global collaboration and equitable access to vaccines

Context and Issue

- National and regional initiatives prioritising supply for domestic population over global health needs
- Competition for candidates – bidding frenzy
- Inequitable access to vaccines – only accessible by countries that selected successful candidates
- Countries without financial resources left behind
- Inefficient use of resources

Solution: COVAX Facility

A globally coordinated mechanism for financing and procurement is required to accelerate equitable access to appropriate, safe and efficacious vaccines

Supporting objectives:
- Secure supply rapidly through resilient scale-up of manufacturing
- Reduce uncertainty and lack of predictability of demand and financing as a barrier to manufacturing expansion
The COVID-19 Vaccine Global Access (COVAX) Facility enables global collaboration and equitable access to vaccines

The COVAX Facility is administered by the Gavi Secretariat and implemented in partnership with ACT Accelerator actors

1. Agreements with manufacturers would be unified across full scope of countries participating in the Facility, but ODA funding will only be used to support LICs and LMICs
2. Financing for procurement incremental to contribution
Gavi COVAX AMC is an innovative finance instrument within the Facility focused on securing Vaccine access for LICs/LMICs

Gavi COVAX AMC was launched on June 4 and is the first building block of the COVAX Facility

Financing the Gavi COVAX AMC

- Seed funding ask of US$ 2 billion to secure doses for LICs/LMICs¹
- 4 June launch, with over US$ 500 million raised – primarily ODA from OECD countries

Access to COVAX doses

- LICs/LMICs get access to vaccines as soon as they become available to vaccinate highest priority populations
- Doses allocated based on WHO’s global allocation framework

¹ Financing for procurement incremental to contribution
² Additionally includes 12 IDA-eligible Small Economies
Considerations for delivery at-scale of future COVID-19 vaccines

Programme design and country readiness

- **Strong coordination** to ensure vaccine characteristics, SAGE recommendations and policy guidance are appropriate to meet the programmatic realities of Gavi countries.

- Efforts underway to develop:
  - Vaccine programme objectives, **delivery** and **use scenarios**
  - Operational guidance materials and tools
  - **Costing** and **funding requirements**

- Provide timely support to address absorptive capacity challenges (e.g. HR capacity, gov’t advocacy, vaccine acceptance, cold chain, etc.)

Unique challenges and uncertainties

- **Vaccine characteristics**

- **Targeting unique sub-populations** (Healthcare workers, elderly, etc.)

- **Regulatory, Safety Monitoring, Indemnification**
Delivery of COVID-19 vaccines may require significant and urgent ramp-up of cold chain capacity

- Gavi leading inter-agency effort on CCE as part of ACT-A HSS connector
- Recommendation to use CCEOP to address cold chain needs for all COVID-19 commodities of 78 LICs / LMICs and 12 IDA-eligible small economies
  - Potentially significant additional investments (~US$ 40-140 million for HSS-supported countries until 2025; additional US$ ~85 million to US$ ~200 million if expand to the 90 countries) in CCE required for COVID-19 vaccine delivery – suppliers could likely meet demand within few months but need a clear demand signal
  - Expanding support to cover cold chain needs for COVID-19 diagnostics and therapeutics may require only limited incremental CCE capacity
- Request for guidance on opportunity to leverage CCEOP to provide cold storage capacity for other PHC commodities (e.g. oxytocin, insulin) and drive health facility solarisation
Recommendation (1 of 2)

The Gavi Alliance Board is requested to:

a) With respect to the COVAX Facility:

i. **Note** that the COVAX Facility is proposed as a time-limited global, coordinated mechanism designed to ensure rapid and equitable access to a safe and efficacious COVID-19 vaccine to as broad a global population as possible and that without such a mechanism, manufacturers may not expand production capacity to adequately address the global pandemic, leaving behind vulnerable populations across the globe and in particular those in the lower income countries served by Gavi;

ii. **Note** that the Gavi Secretariat is acting as the administrator for the COVAX Facility to support its design and operationalisation and that the Secretariat will develop, for the Gavi Board’s consideration, a more detailed description of Gavi’s role in coordinating and operationalising the activities including how the Secretariat assumes liabilities on behalf of the COVAX Facility, as well as a tailored governance mechanism for the COVAX Facility;
Recommendation (2 of 2)

b) **Confirm** Gavi’s role in supporting cold chain support for COVID-19 vaccines, diagnostics and treatments in 78 low and lower middle income countries and 12 IDA-eligible small economies, as agreed by the members of the ACT Accelerator, contingent on approval by the Board of a refined proposal to be developed by the Secretariat as described in Section 7 to Doc 05; and

c) **Provide** guidance on the proposal to consider support to countries on cold chain needs across PHC commodities and to further explore the use of CCEOP as a platform for health facility solarisation as part of a co-investment model with other donors.
Thank you

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