

Welcome back to  
the **World Bank's MENA  
COVID-19 vaccination  
strategy** workshop series

We will be  
starting shortly

Here are some house  
keeping rules



We **want to hear from you;**

- If you have questions or comments to share during the presentation, please **share your thoughts using the Zoom chat feature**
- Our team will **monitor the questions** and **share them with the presenters** to address immediately or when they get to the appropriate topic

At the end, there will be a **short Q&A session** where you can raise outstanding questions

Please mute your voice tab to minimize outside noises

Thank you for your engagement and participation!

Please note that this session is being recorded and content will be shared publicly

*WORLD BANK MENA COVID-19 VACCINATION WORKSHOP SERIES*

*Workshop 10*

*Private Means, Public End: Private Sector's Participation in COVID-19 Vaccination*

Wednesday April 21st, 2021 | 8:00 . 9:30 AM EST



**Moderator**

Jorge Coarasa

Senior Economist, MENA HNP, World  
Bank

## ABOUT THE WORKSHOP

The private sector has an important role to play in COVID-19 vaccination. For decision makers, the key questions are the what's and the how's to facilitate private sector participation. The World Bank Middle East & North Africa (MENA) Health, Nutrition & Population (HNP) Global Practice welcomes you to a discussion of private sector's participation in the rollout of COVID-19 vaccines by a group of global, regional and country experts.

They will discuss the perspectives of both policy makers and private sectors and will also engage in Q&A and reflect on some key critical lessons emerging from the workshop.

# AGENDA

Time	Topic	Presenter
8:00-8:10am	Introduction and Reflections on Workshop Series	Jorge Coarasa Senior Economist, MENA HNP, World Bank Rekha Menon, Practice Manager. MENA HNP, World Bank
8:10-8:50am	Presentations	8:10am-8:20am Engaging private sector in vaccine delivery Andreas Seiter- Global Lead – Private Sector--World Bank. 8:20-8:30 am Practical issues in (i) local manufacturing of COVID-19 and (ii) contracting private sector for vaccine delivery Karine Bachongy -Principal Investment Officer, IFC. 8:30-8:40 am- Private sector's participation in the US: the experience of CVS James C. Margiotta Senior Vice President, Return Ready, CVS Health 8:40-8:50 am- The experience of the Philippines Dr. Albert Domingo Health Systems Specialist, Philippines
8:50-9:10am	Panel reflections:	8:35-8:55 am- Panel discussion <ul style="list-style-type: none"> <li>•Lebanon country perspectives (3:35-3:45): Dr. Mohammad Haider - Principal Medical Advisor of H.E. Minister of Public Health, Lebanon</li> <li>•KSA country perspectives (3:45-3:55): Dr. Khaled Abdulkarim- Assistant Deputy Minister for primary healthcare, Kingdom of Saudi Arabia</li> </ul>
9:10-9:25am	Q&A Session –All speakers	Moderated by Jorge Coarasa
9:25-9:30am	Closing Remarks	Moderated by Jorge Coarasa



**Welcome Remarks**  
Rekha Menon, Practice Manager.  
MENA HNP, World Bank.

# Engaging the Private Sector in Vaccine Delivery for COVID-19

Andreas Seiter

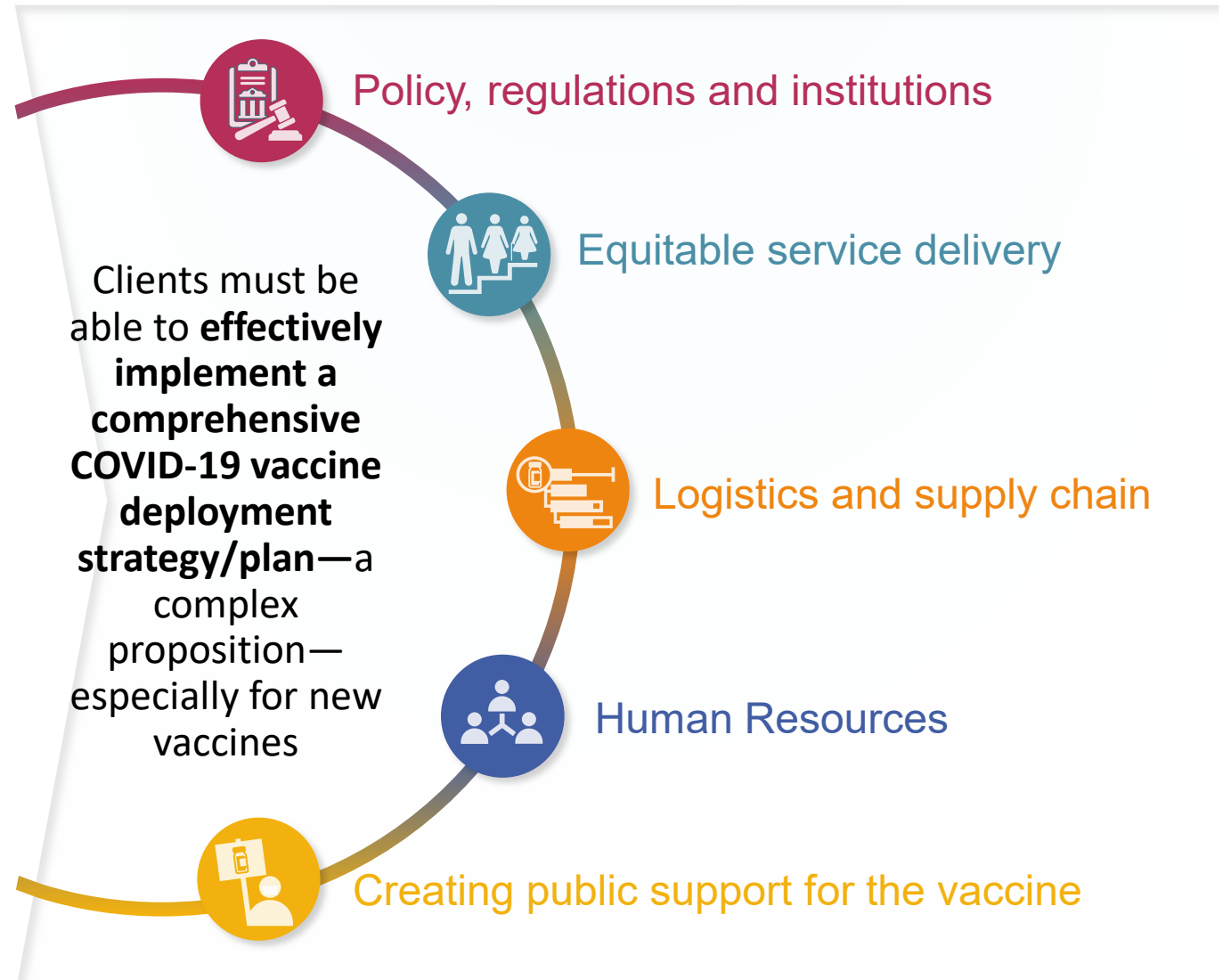
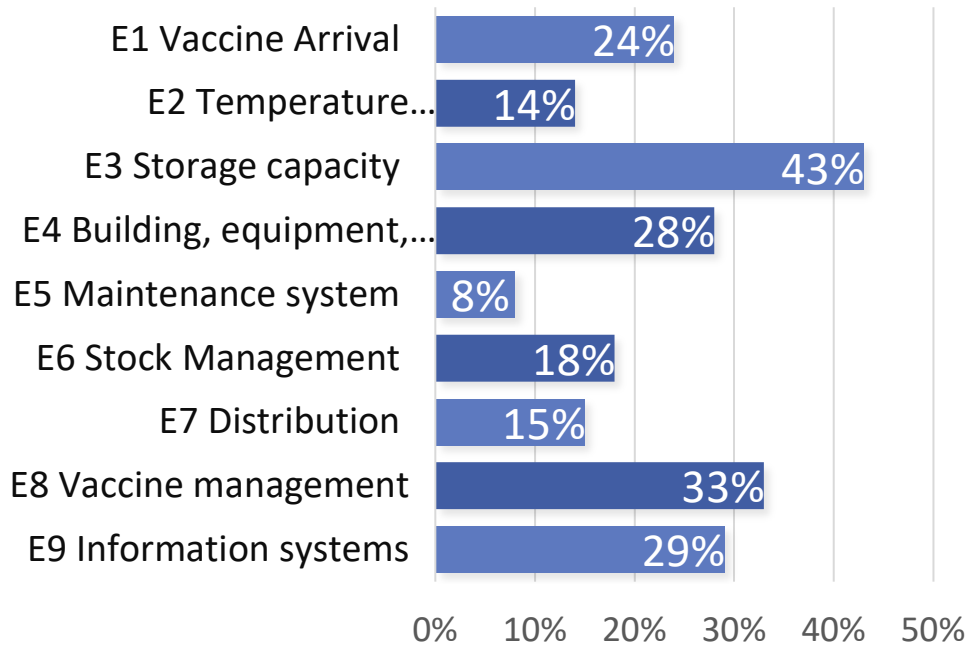
Global Lead, Private Sector

Health Nutrition & Population. World Bank

# PREPARING FOR VACCINE DEPLOYMENT MUST START IMMEDIATELY

Many countries will face major challenges deploying vaccines at scale—especially the Bank's IDA client countries

**% of LICs/LMICs achieving minimum WHO standard in vaccine management**



# THE LONG ROAD TO VACCINATION

Vaccines must be kept between 2–8° C all the way from the factory to some of the most remote places on earth



Data analysis



Vaccination prioritization and purchase



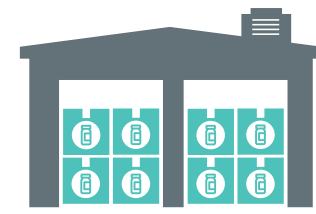
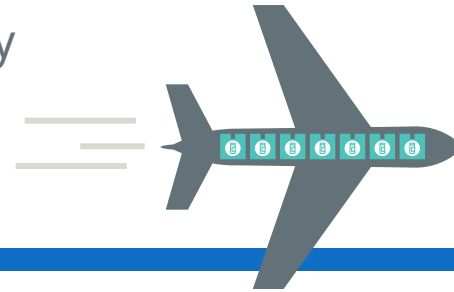
Monitoring



Reporting



Factory



National storage facility



Regional storage facility



Clinic





## HOW CAN THE PRIVATE SECTOR HELP?

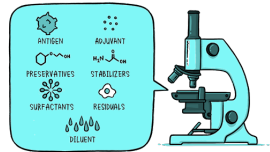
- **Private health sector** are individuals and organizations that are not owned nor directly controlled by governments.
- **Private health sector** consists of formal and informal, for-profit and not-for-profit entities both domestic and foreign



Population immunized  
against COVID19

Credits for Content and Design: WHO Geneva

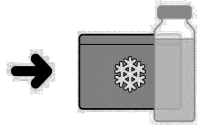
# EXAMPLES OF PRIVATE SECTOR ENGAGEMENT ALONG THE VACCINE VALUE CHAIN



## Research & development

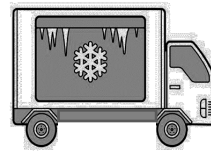
The **EU** funded COVID-19 vaccine research through a public-private partnership called Innovative Medicines Initiative

Credits for Content and Design: WHO Geneva



## Manufacturing

Contracting arrangements between **COVAX** facility and multiple manufacturers.



## Storage, transportation & distribution management

The Government of **Ghana** signed a MoU with mPharma to support the expansion of the of supply chain capacity in Ghana for the storage and distribution of the COVID-19 vaccines



## Advocacy & communication

Private communication experts in the **Philippines** are pooling efforts with the govt to spread constructive information education on the vaccines

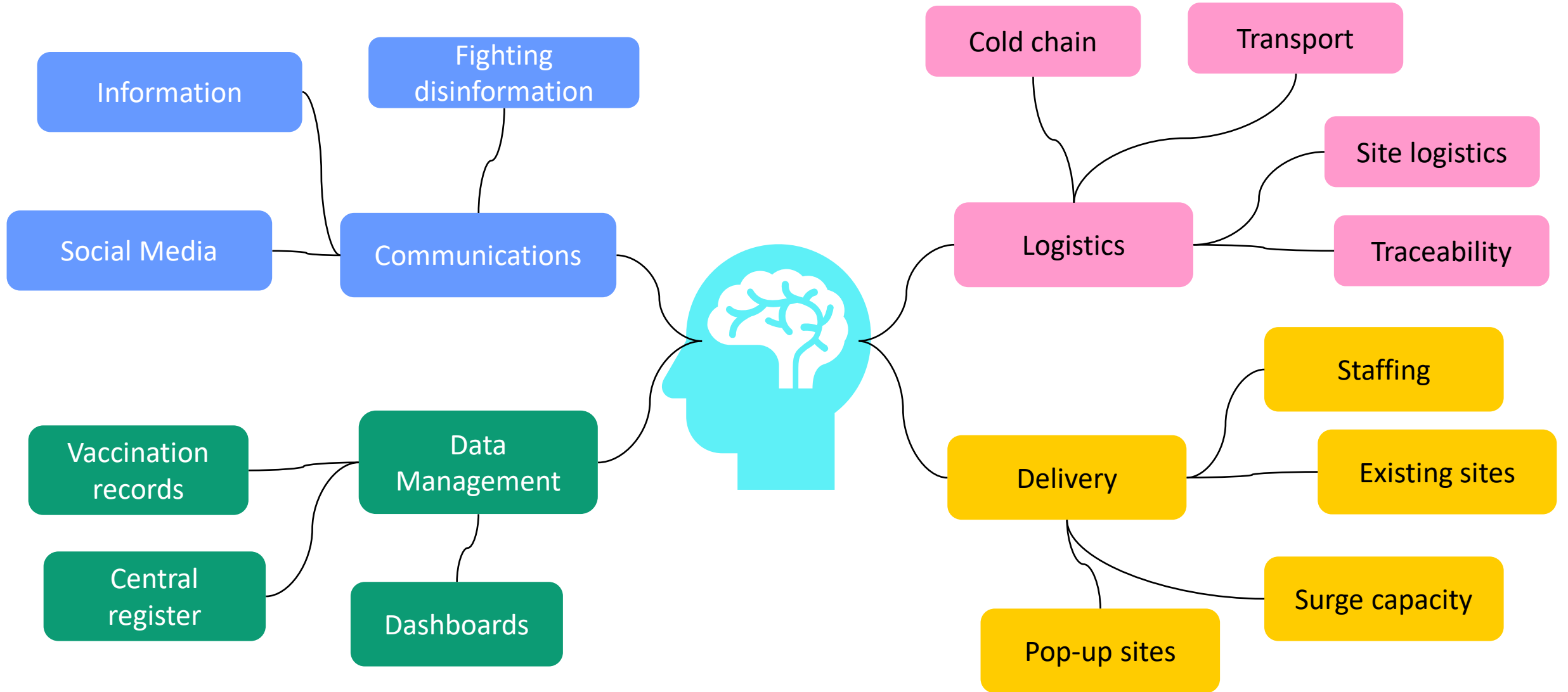


## Vaccine's delivery

The **Philippines** govt passed an act permitting the private sector to administer COVID-19 vaccines covered by PhilHealth.

The **Ecuadorian** govt partners with the private sector to distribute COVID-19 vaccines to the population.

# MIND MAP FOR PRIVATE SECTOR ENGAGEMENT



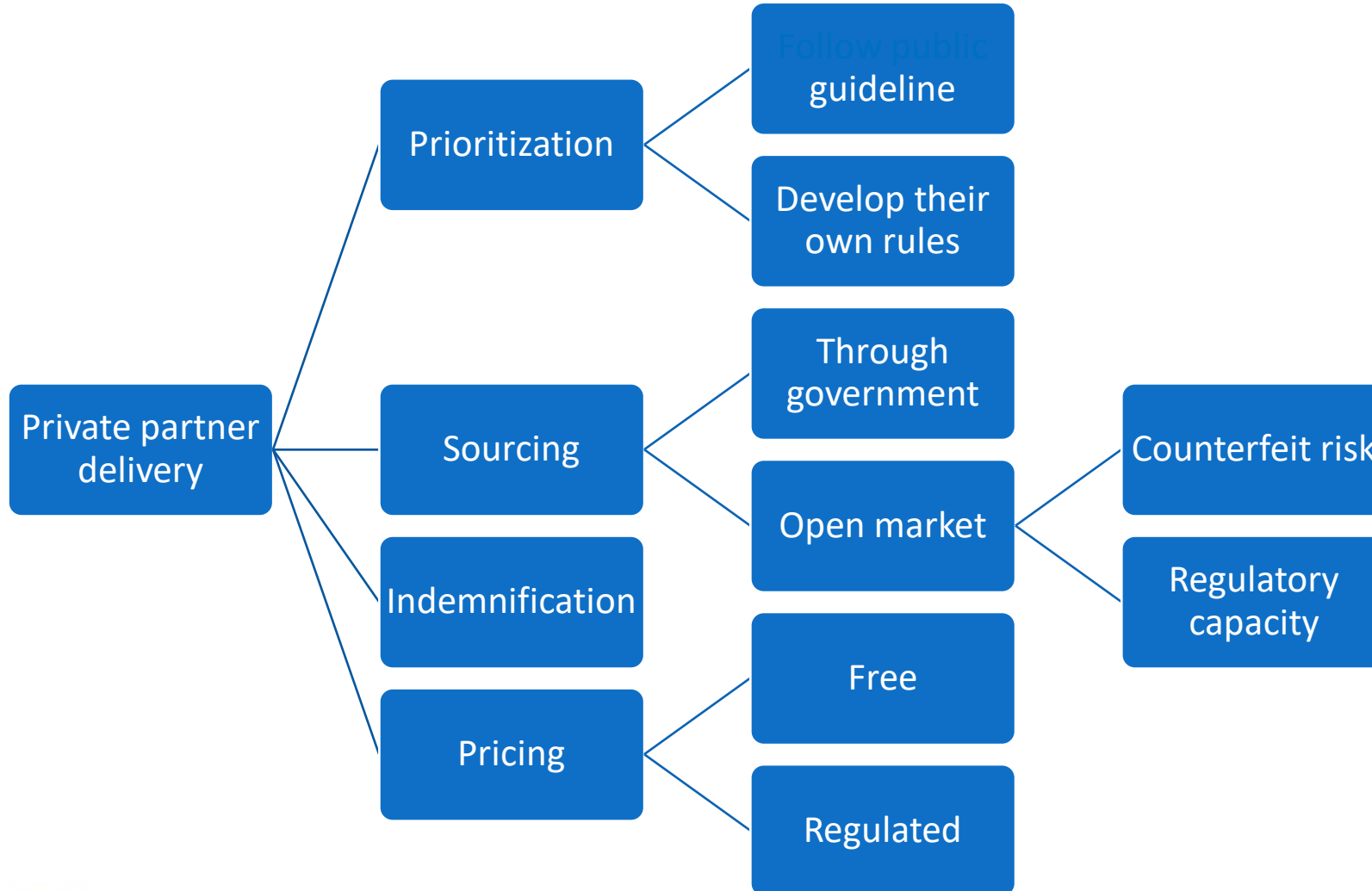
## THINK CREATIVELY ABOUT WHO TO WORK WITH

- Which potential partners have a strong self-interest in getting the country back to normal and are willing to invest their own resources?
- Who has large surge capacity, allowing to increase the number of vaccines delivered per day?
- Who has credibility in speaking to audiences the government cannot easily reach?
- Who has knowledge and skills complementary to the government – and can challenge the assumptions made at the top?

### *For Biden, a New Virus Dilemma: How to Handle a Looming Glut of Vaccine*

As U.S. manufacturers hit their stride, vaccine scarcity will soon turn to plenty as much of the world goes begging. And vaccine makers need answers now about what to do with the coming surplus.

# Governance and Vaccine Safety in Different Scenarios



# Governance and Vaccine Safety in Different Scenarios

	Sourcing	Indemnity and compensation	Contracting w/ private sector	Price	Prioritization	Vaccine certificate, digital registry	AEFI
Public financing, private delivery	Public	National arrangements	Yes	Free for citizen	Country rules	National system	National system
Private financing, public delivery	Public	National arrangements	Yes	Covered by employer	(i) Country rules (ii) Set their own rules	(i) National system (ii) Proprietary System	National system
Private financing and delivery	(i) Public (ii) Private from open market ( <i>counterfeit risk</i> )	National arrangements	No	(i) Various options (ii) Regulated or unregulated	(i) Country rules (ii) Set their own rules	(i) National system (ii) Proprietary System	National system



## WORLD BANK WORKSHOP SERIES

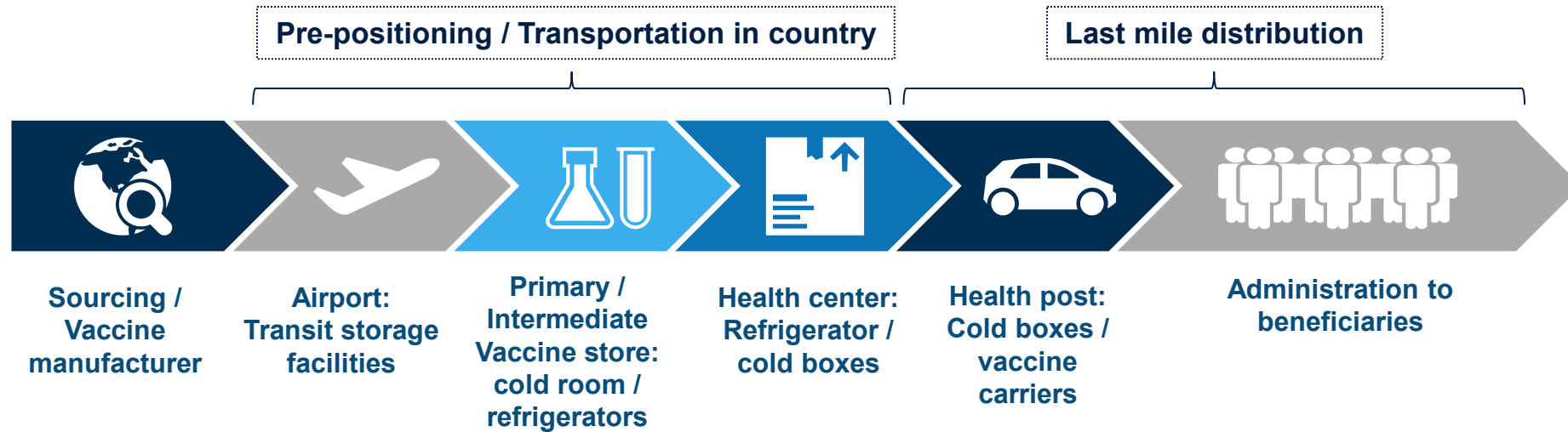
2021

### FOCUS ON LOCAL MANUFACTURING AND CONTRACTING

Karine Bachongy

Global social infrastructure lead  
PPP transaction advisory to Governments

# Value-chain - Vaccine Introduction Readiness Assessment Tool (VIRAT WHO)



## What can the Private Partner do?

- Local manufacturing question

- Warehousing
- Transportation
- Fall-back facilities with cold chain storage
- Development of systems for tracking and monitoring stock and distribution of vaccines and key supplies
- Security at storage facilities and for in-transit of products

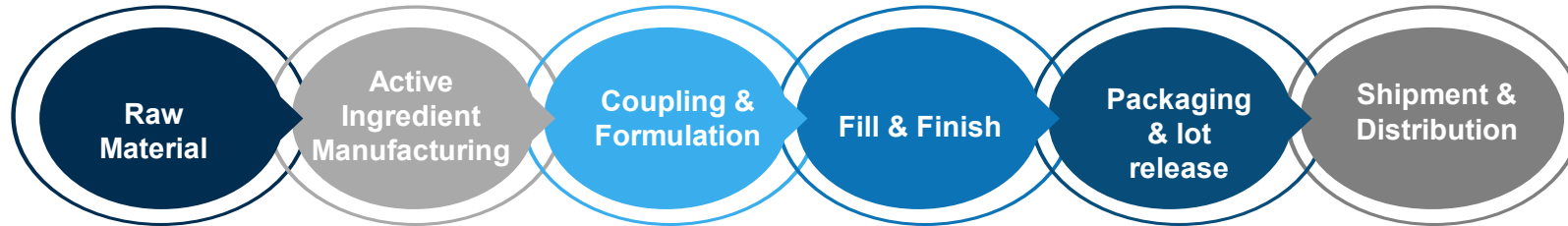
- Vaccination registration and reporting
- Administration to patients
- Development of electronic monitoring tools including analytical tools to monitor progress and facilitate vaccine delivery
- Adverse event following immunization (AEFI) reporting
- Waste management – provision of supplies and equipment / hazardous waste storage, transportation and disposal

### Other activities the private sector may get involved in (VIRAT tool):

- Development of key messages and materials for public communications and advocacy
- Collecting feedback and grievances in relation to the vaccination program



# Local Manufacturing – Key Risks, Key Enablers



## Public or private manufacturing?

- Which part of the value chain? **Local manufacturing projects pertain mostly to fill-and-finish and packaging**
- New technology - R&D public, multinationals, biotech – High barriers to entry
- EPI – private manufacturers and **few state-owned manufacturers** (Brazil, Mexico, Indonesia, Cuba...). I.e. 10 North/African companies involved in vaccine production are consolidated in 5 countries (SA, Morocco, Tunisia, Egypt, and Senegal) of which 5 Instituts Pasteur. Supply <1% of volume.
- **Vaccine manufacturing has significant economies of scale.** Costs vary enormously, i.e. polio << pentavalent requiring conjugation technology. Domestic demand for vaccines is too small
- **Demand access challenge: buyer consolidation:** GAVI supports ~90% of the African market by volume and ~2/3 by value. Manufacturer require **demand certainty and larger procurement volumes** which requires exceptions to public procurement laws.

**Strong political commitment and sector reforms** – strengthen regulation, regional medicines agencies, regional demand co-ordination





**Procurement**  
Developing well-structured, long-term offtake agreements

**Promote industrial partnerships / JVs** with international vaccine manufacturers and local sterile products manufacturers

**Address capacity constraints**  
Developing pool of talent, incentivizing investments

# Contracting for COVID Vaccinations – What to pay attention to



 <b>Considerations for public authority</b>	 <b>Main Parameters</b>	 <b>Evaluation Criteria</b>	 <b>KPIs</b>
<ul style="list-style-type: none"> <li>• Own competencies in distribution, warehousing, stock control, etc.?</li> <li>• Capacity and funding to meet future growing demand?</li> <li>• Would transferring certain risks to a third party improve efficiencies and access new capabilities?</li> <li>• Do we have full understanding of current costs in existing in-house operations?</li> <li>• Are there improvement opportunities such as redesigning the supply chain through outsourcing?</li> <li>• Do we have the technical capacity to manage an outsourced partner?</li> <li>• Risk and implications of use of urgent public procurement laws</li> </ul>	<ul style="list-style-type: none"> <li>• <b>What activity will be outsourced?</b></li> <li>• <b>What are we trying to achieve?</b> <ul style="list-style-type: none"> <li>• Risk transfer</li> <li>• Capacity to grow</li> <li>• Cost optimization</li> <li>• Improving service</li> </ul> </li> <li>• <b>What are the risks of outsourcing?</b> <ul style="list-style-type: none"> <li>• Mitigation strategies</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Cost</b></li> <li>• <b>Service</b></li> <li>• <b>Financial standing</b></li> <li>• <b>Business scale</b> <ul style="list-style-type: none"> <li>• % of overall business</li> </ul> </li> <li>• <b>Profile of existing services</b></li> <li>• <b>Experience in public health</b></li> <li>• <b>Experience in country</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Daily % of consignments arrived on time in full</b></li> <li>• <b>Daily % of delivery points served</b></li> <li>• <b>Temperature control compliance</b></li> <li>• <b>Vehicle uptime %</b></li> <li>• <b>Road traffic accidents per million km</b></li> <li>• <b>Cost per unit</b></li> <li>• <b>Number of (priority) people vaccinated</b> (if private sector is contracted to deliver the vaccine)</li> </ul>

# Some case studies: contracting private sector

COVID..... and BEFORE



## India: Private Sector contracted to administer COVID-19 Vaccinations

- Recent target was to vaccinate **30 million health care and front-line workers in the first phase of vaccination**, but the **government achieved less than half of that number**.
- Scientific experts believe that the vaccination drive needs to be upped **by at least 6 to 10 times if the target is to immunize 300 million people most at risk of exposure or death, by August**.
- During the second phase, the government decided to involve **private hospitals in administering the vaccine shots**. Private centers would out-number the government facilities by 20,000 to 10,000 according to Union Minister Shri. Prakash Javedkar.
- Private hospitals have **dedicated up to 40% to 80% of their bed capacity** for treating patients and supplemented government efforts of scaling up testing by **contributing to 45% of the testing capacity in India**.
- Government has capped the ceiling of the amount **chargeable by private hospitals at US\$ 3.42 per person per dose**.
- Those who are eligible can **self-register on the government's portal**.



## United States: private sector contracted for supply chain

- Before 2008, the **US vaccine supply chain was decentralized, highly inefficient and fragmented**.
- As the system expanded, individual points of failure led to **vaccine shortages, stockouts, and funding delays**.
- Government developed a new **vaccine management system**, which included **outsourcing the entire vaccine distribution process to a private distributor**.
- New system designed to enhance operating efficiency, improve vaccine inventory visibility, and reduce operating expenses, and **shared attributes of companies (e.g., Amazon) that employ best practice in supply chain management**.
- Changes led to a **streamlined vaccine supply chain**, which reduced vaccine loss, improved the reliability of supply, and reduced overall costs.
- As of early 2008, it is estimated that the **government's overall return on investment was US\$400 million**, with annual savings of US\$19.5 million beginning in 2012.

# Some case studies : contracting private sector

COVID..... and BEFORE



## Ghana: Vaccines for Africa, an initiative of mPharma – vaccination of private employees, supply chain

- **Vaccines for Africa Initiative (VACFA)** is a partnership of individuals and organizations who have come together with a goal of increasing awareness of and promoting uptake of vaccines on the African continent.
- **mPharma** is a healthcare technology company headquartered in Ghana whose mission is to develop **an efficient supply chain network of essential medicines**.
- For every vaccine sourced for employees, private sector employers participating in the program will **donate a free vaccine** to the Government of Ghana to administer to the most vulnerable.
- A consortium of **major private sector players** have committed to the initiative. Ghana's **top private hospitals are to establish 20 vaccinations sites**.
- It is estimated that 1.25 million people will be vaccinated by their employer and, hence, 1.25 million through donations.
- **Building cold chain, warehousing, and logistical capacity to store, transport, and distribute different vaccines.**
- Plans to bust myths and conspiracy theories through a **coordinated communications campaign**.




## South Africa, supply chain and logistics

- A vaccine management assessment conducted in 2004 revealed numerous shortcomings and highlighted the **need to upgrade the entire cold chain system**, particularly if new vaccines were to be introduced.
- Upgrading the government-run provincial vaccine store **required large capital investment**, for which no budget was available.
- In 2005, Western Cape Province entered into a public-private partnership by **outsourcing vaccine procurement, provincial storage and vaccine distribution**, to health centers across the province.
- A review of the outsourcing experience in South Africa revealed **improved vaccine management during storage and transportation, and orders being met in a timelier fashion**.
- The 6.0% **outsourcing fee was cost-effective** when compared to the supply chain and logistics costs of the previous government-run system.

The comparative benefits of outsourcing in South Africa and Thailand.

	South Africa	Thailand
In-house supply chain cost (percentage of vaccine cost)	28%*	31%
Outsourced supply chain cost (percentage of vaccine cost)	6%	5%
Outsourcing cost indicators (per vaccine dose)	US\$0.27	US\$0.36

\* This figure represents the average cost of a government-run supply chain system for vaccines in Eastern and Southern Africa, estimated based on countries' comprehensive multiyear plans



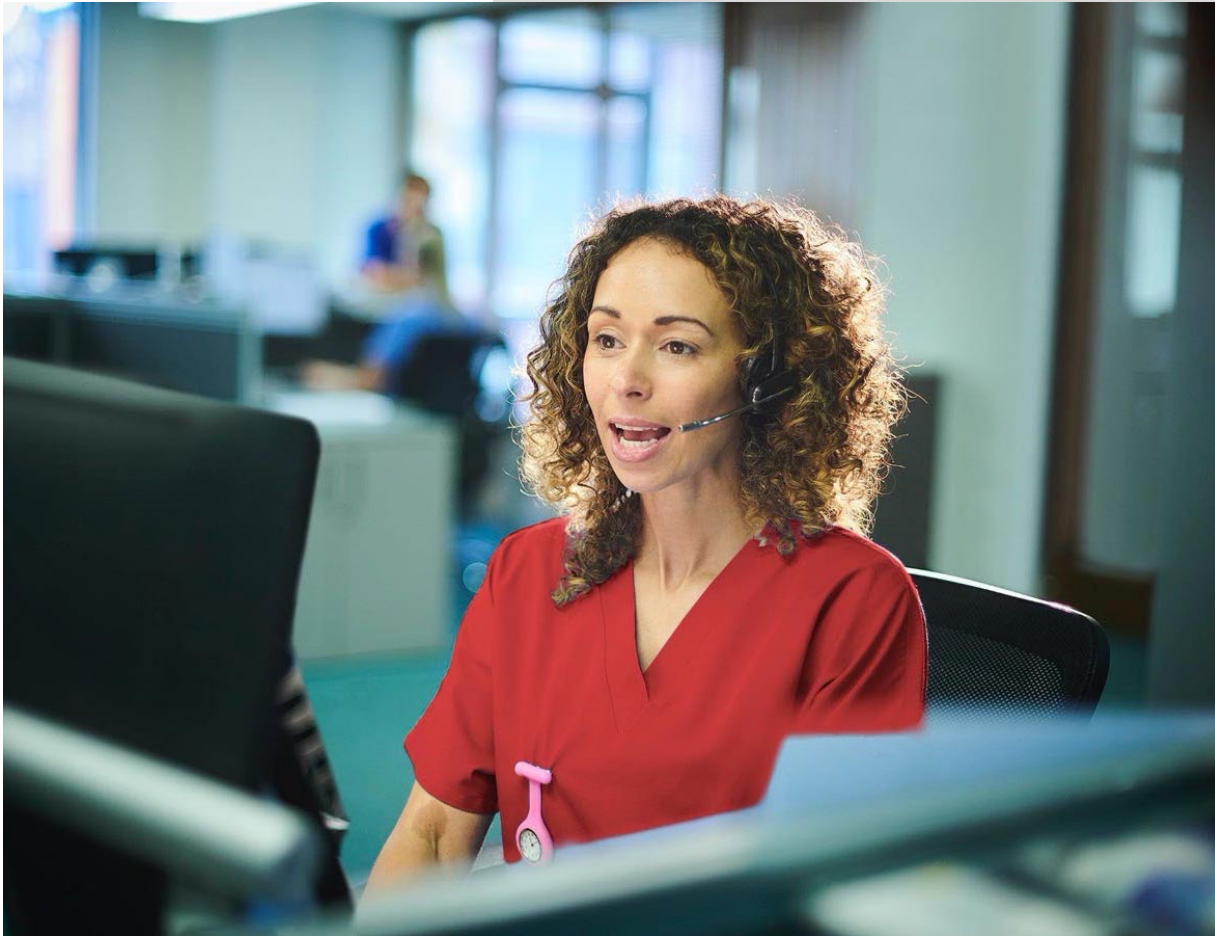
# Private means, public end: The whys, whats and hows of private sector's involvement in COVID-19 vaccination

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**James C. Margiotta**  
Senior Vice President, Return Ready  
CVS Health

April 21, 2021

 **CVSHealth**<sup>®</sup>

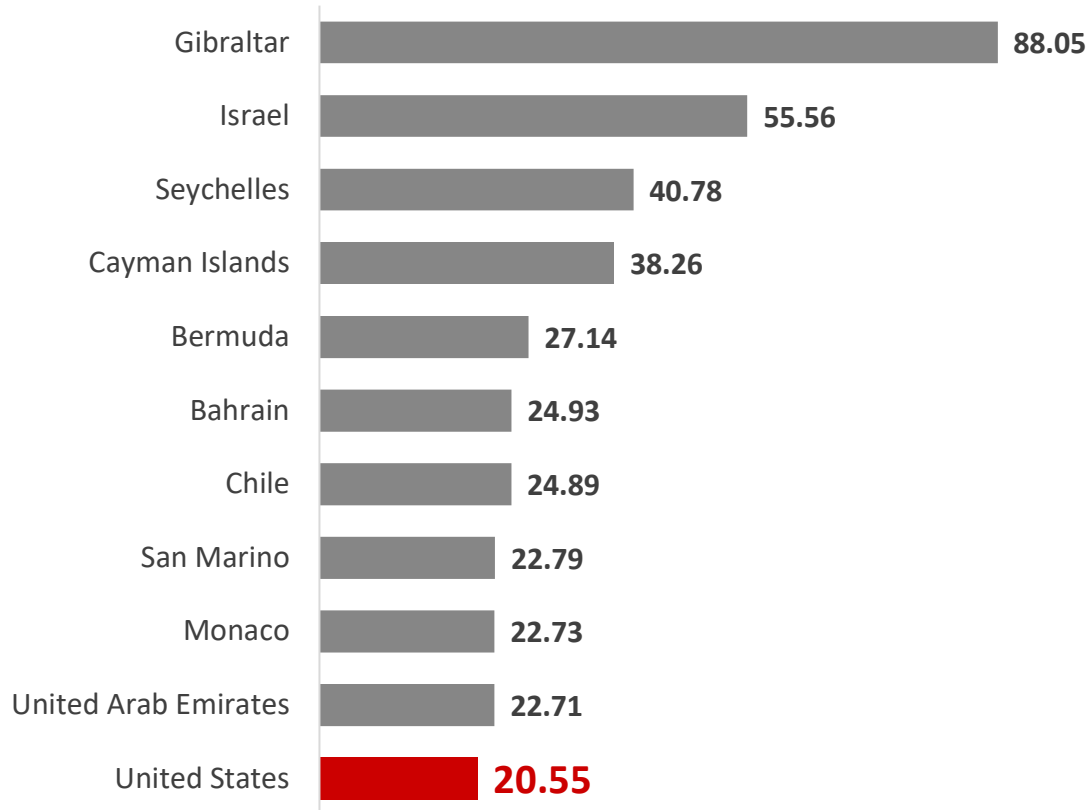


## Private Sector and COVID-19 Vaccination

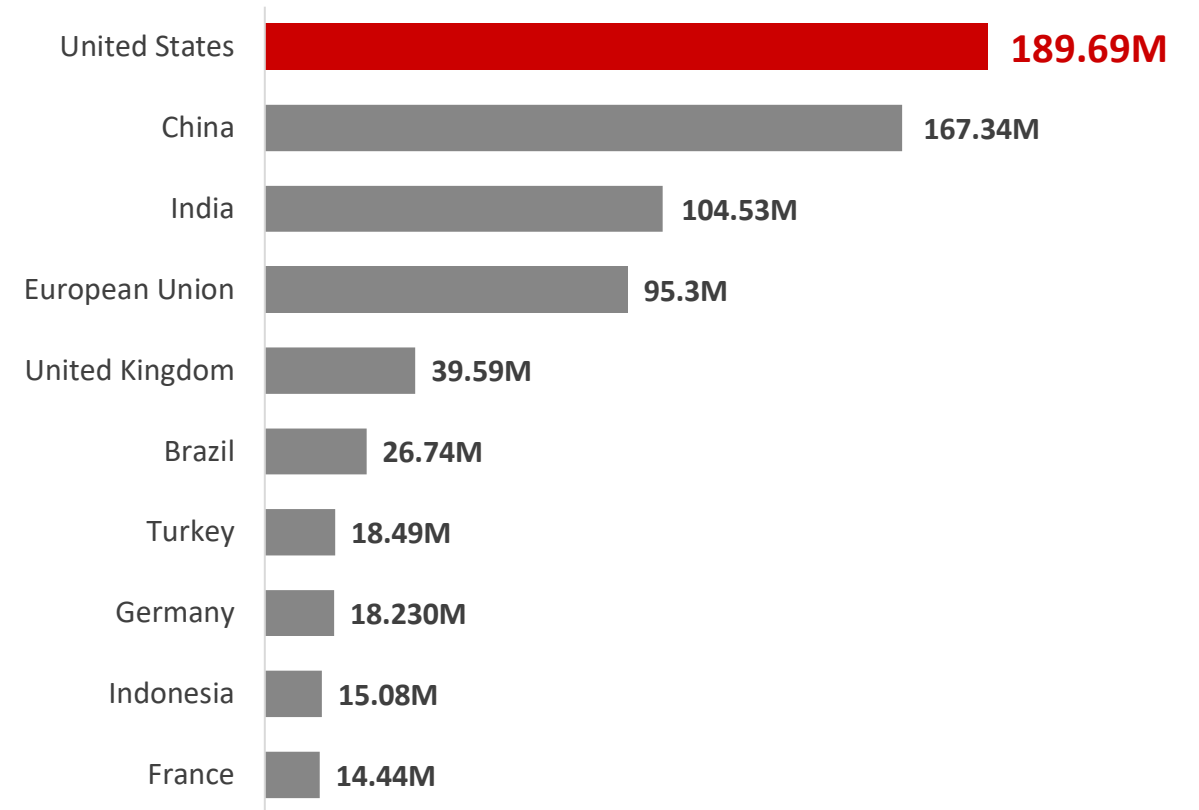
- How does vaccine distribution work in the US?
- What is the role of the private sector?
- How does the government facilitate this?
- What's coming next?

# Global trends in COVID-19 vaccinations

## Percent of population vaccinated



## Doses administered



Source: Official data collected by Our World in Data – last updated April 12, 2021  
<https://coronavirus.jhu.edu/vaccines/international>

# Vaccine distribution in the U.S. – how it works



## Federal government



### Federal agencies & entities



### States



### Pharmacies

Indian health services

Other federal entity sites  
(e.g., Federally qualified health centers)

Hospitals

Physicians

Pharmacies

Public health sites and mobile vaccination clinics

Pharmacy Partnership for Long-Term Care Program

Federal Retail Pharmacy Program

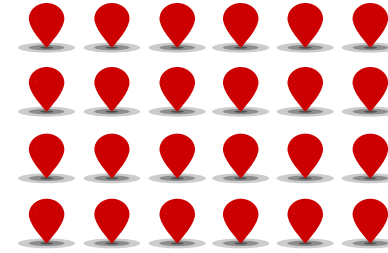
EXAMPLES OF ADMINISTRATION SITES



# United States government key vaccine initiatives

## More locations

to administer  
vaccinations



**100M vaccine shots in 100 days goal**

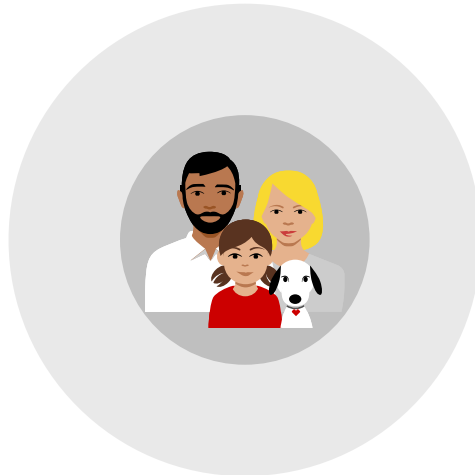
Launched **Federal Retail Pharmacy program** on Feb 12 with 21 national pharmacy partners and networks of independents pharmacies representing >40,000 pharmacy locations nationwide

Scaling **mobile vaccination clinics** to reach underserved and **partnerships with FQHCs**

## More people, with a focus on health equity,

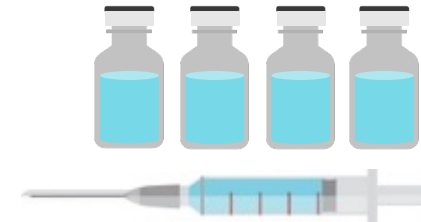
need to get the  
vaccine

Focus on priority  
groups including **high  
risk** and **underserved  
populations**



## More supplies

of vaccines and  
ancillaries available



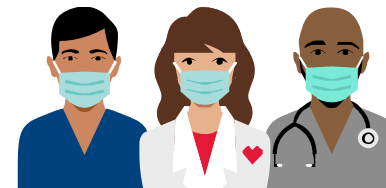
**Pfizer:** 300M dose total commitment (118M delivered to date)

**Moderna:** 300M dose total commitment (102M delivered to date)

**Johnson & Johnson:** 100M dose total commitment (16M delivered to date)

## More immunizers

to get vaccines in arms



**Invested in 100,000** new public health workers that will work in their communities and provide vaccine outreach and contact tracing services

## More consumer education

to address vaccine  
hesitancy



Launched a **public education  
campaign**

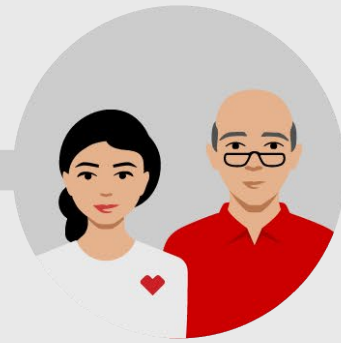
# State governments and local jurisdictions will determine who gets the vaccine and when, guided by the following CDC recommendations:



## Phase 1a

Health care workers

Long-term care residents



## Phase 1b

Front line essential workers

People ages 75+



## Phase 1c

People ages 65–74

People with high-risk medical conditions, ages 16–64

Other essential workers



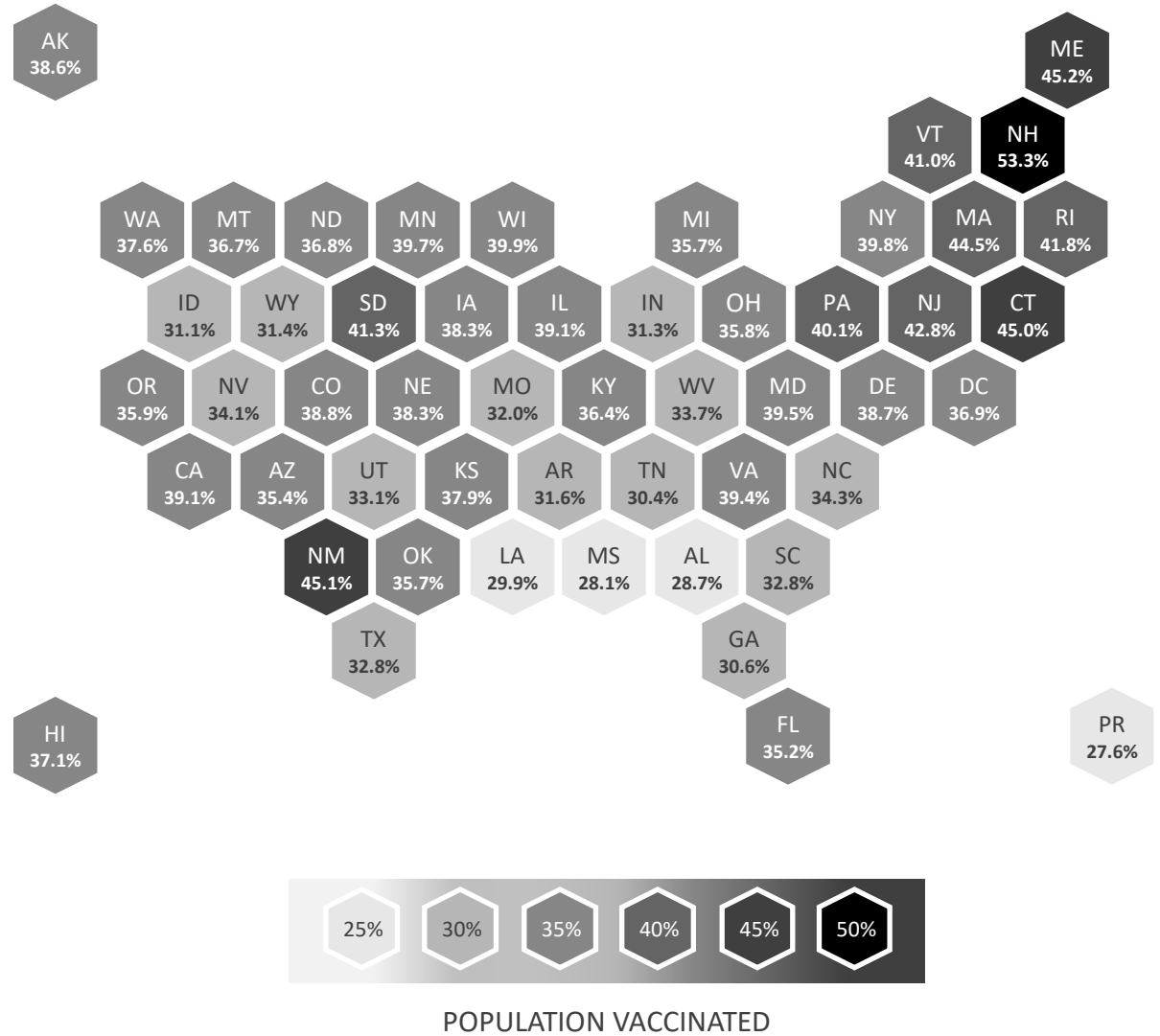
## Phase 2

General population, ages 16+

# Tracking COVID vaccinations by state

~189.69M doses have been administered in the US so far

36.4% of the population has received at least one dose of the vaccine in most states



Data updated as of April 12, 2021.  
 Source: <https://covid.cdc.gov/covid-data-tracker/#vaccinations>

# Addressing vaccine hesitancy

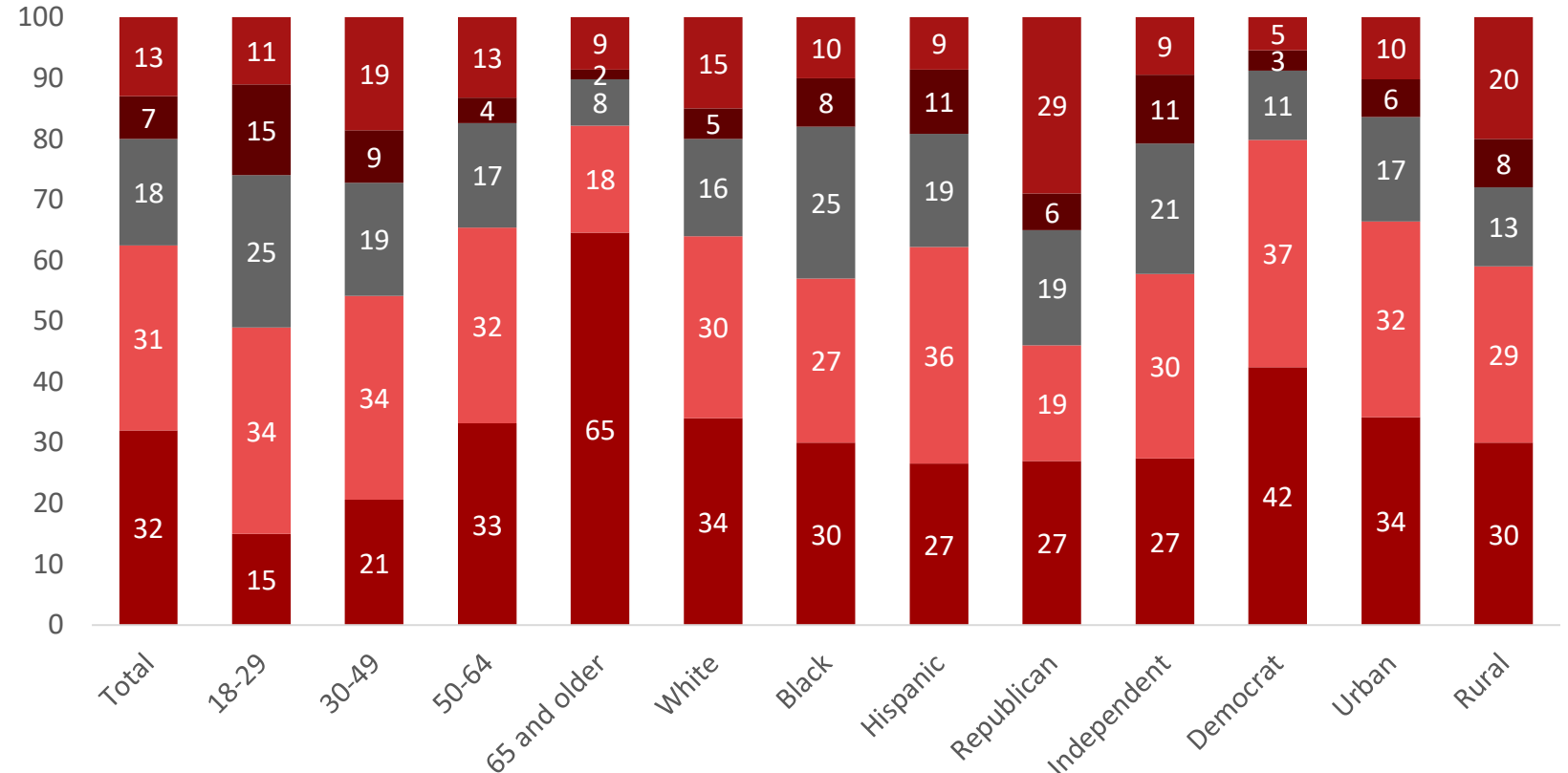
Vaccine enthusiasm by % of population

- Definitely not get the vaccine
- Only if Required
- Wait and see
- Get the vaccine as soon as possible
- Already got vaccinated

## Vaccine hesitancy highest among rural residents and young people

Concerned about potential side effects, vaccine side effects being worse than COVID-19, and being required to be vaccinated.

**Vaccine enthusiasm increasing across racial and ethnic groups** compared to January 2021.



Source: <https://www.kff.org/coronavirus-covid-19/dashboard/kff-covid-19-vaccine-monitor-dashboard>, data March 5-22, 2021

# Next chapter

## COVID-19 will continue to be a presence

Vaccine boosters, ongoing testing, and vaccine passports will help to create a new normal.

Menu Search **Bloomberg**

Coronavirus Daily  
**Covid Testing Is Here to Stay**  
By *Emma Court*  
February 18, 2021, 7:30 AM EST

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**Covid testing is here to stay**

In a year filled with economic pain for most businesses, laboratories and test manufacturers stood out as a clear exception. An almost insatiable demand for virus testing boosted their revenue and share prices.

As vaccines are rolled out, though, that picture is starting to change. One illustrative moment came late last week, when Laboratory Corp of America Holdings—one of the biggest U.S. processors of Covid-19 tests—said revenue for that

**In this article**

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HEALTH AND SCIENCE

**Moderna hopes to have Covid booster shot for its vaccine ready by the fall, CEO says**

PUBLISHED WED, APR 14 2021-9:30 AM EDT | UPDATED WED, APR 14 2021-12:28 PM EDT

 **Kevin Stankiewicz**  
@KEVIN\_STANK

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**KEY POINTS**

- Moderna hopes to have a Covid booster shot available for Americans by the fall, according to CEO Stéphane Bancel.
- Last month, the NIH began testing a variety of offerings from Moderna to use as a third shot as concern grows about emerging variants.
- The Massachusetts-based biotech firm expects to submit booster-shot data to U.S. regulators within a few months, Bancel told CNBC Wednesday.

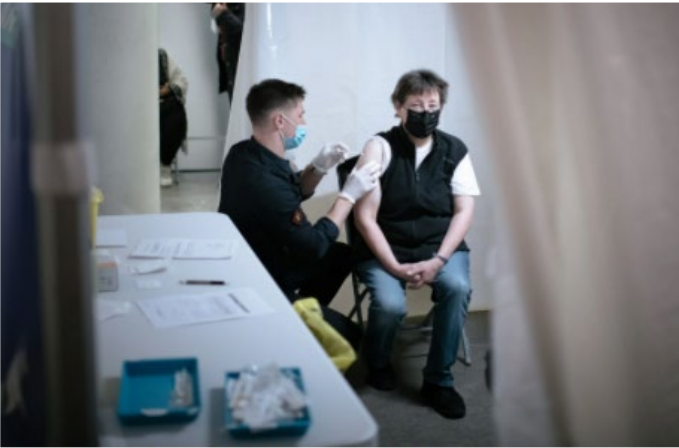
**The New York Times**

The Coronavirus Outbreak > LIVE Latest Updates Maps and Cases Risk Near You Who Can Get Vaccinated? Vaccine Questions


**Vaccine Passports: What Are They, and Who Might Need One?**

The concept of documenting vaccinations is being taken to new levels of sophistication, and experts predict that electronic verification will soon become commonplace.

f i t v



g a vaccine in Saint-Denis, outside Paris, on Wednesday. Dmitry Kostyukov for The New York Times

 By **Richard Pérez-Peña**

April 9, 2021

With Covid-19 vaccinations accelerating, attention is turning to tools for people to prove that they have been inoculated and potentially bypass the suffocating restrictions used to fight the pandemic.

## PANEL DISCUSSION

Lebanon country perspectives

Dr. Mohammad Haider - Principal Medical Advisor of H.E. Minister of Public Health,  
Lebanon

KSA country perspectives

Dr. Khaled Abdulkarim- Assistant Deputy Minister for primary healthcare, Kingdom of  
Saudi Arabia

## Q&A

## All speakers

# Thank you

- *Notes:*

*All workshop recordings are available on the world bank events page*

<https://www.worldbank.org/en/events/2021/02/08/world-bank-mena-covid-19-vaccination-strategy-workshop-series>