Gavi Innovation Catalogue v1.0

November 2020

HPV Prevention and Control Board

Context to the innovation catalogue

Context: innovation approach developed for Gavi 5.0 *To be brought to June 2021 Board*	• **Innovation** critical to reach the Alliance's ambitious **5.0 goals**, including on reaching zero-dose children and missed communities • Gavi will develop an "innovation strategic approach" for country level innovations to ensure that innovation can be delivered efficiently
Why developing a first catalogue of COVID-19 related innovations	• In light of COVID-19 situation and to support countries in maintain & restoring their immunisation services, Gavi has gathered a list **of 21 innovations already tested by countries that could accelerate these efforts** – based on 6 COVID specific needs expressed by countries • Countries could consider some of these innovations depending **on their specific needs**

Rationale and intended use of the catalogue

Rationale behind catalogue

- **Focused set** of COVID related innovations to help maintain and restore immunisation services
- Would help **generate interest of countries** by presenting a neutral picture of innovations

Use case for the preliminary catalogue

- Meant to be a discussion starter for EPI teams, Gavi SCMs, Alliance partners to **explore feasibility**
- Presents **key information** such as:
  - COVID-19 related needs addressed, Intended outcomes
  - Efficacy and demonstrated impact
  - Potential providers
  - Approximate timeline, cost for implementation

Key features of the catalogue

Preliminary list

✓ V1 is a preliminary list of innovations that have already been rolled-out in at least one country - acknowledgement that there are solutions outside it

× V1 is <u>NOT</u> exhaustive

Provider agnostic

✓ Tool agnostic list that suggests some potential providers

× <u>NOT</u> a sales brochure for any particular provider

Step towards marketplace

✓ V1 will enable to generate learnings on how to set-up a real 'marketplace' for innovation in 5.0

× <u>NOT</u> a marketplace yet

21 innovations in the catalogue – examples

A Ensuring strong planning and management capabilities to restore immunisation services

- Dashboard to consolidate & analyse data for better decision making
- Crowd-sourced data collection

B Preparing frontline health workers for the 'new normal' of immunisation and increasing their efficiency

- App to empower HCW with digital tools
- Mobile payments to HCW

C Ensuring agile cold chain and logistics post pandemic, managed with appropriate dashboards

- Remote temperature monitoring to reduce stock wastage
- Last mile delivery optimisation

D Reaching missed communities and under-immunised children

- Geospatial tools to enable better planning for immunisation
- Offline data collection tool

E Engage communities to rebuild demand for immunisation services (incl. addressing misconceptions and rumors on immunisation)

- WhatsApp based interaction with HWF and parents
- Mobile based reminders

F Running innovation labs for co-creation of Innovations

- Innovation hubs

Overview of an example

A1 | DASHBOARD TO CONSOLIDATE AND ANALYSE DATA FOR BETTER DECISION-MAKING
KEY FEATURES

NEED ADDRESSED
Ensuring strong planning and management capabilities to restore immunisation services

PROGRAMMATIC AREA
Data

OVERVIEW OF SCOPE
- The product is an interactive dashboard on immunisation related data that government officials can use to monitor EPI performance and take programme decisions
- The data is sourced from the discrete sets of information hosted across multiple Government departments
- Allows improved data access, utilisation and visualisation by linking disparate sources & merging duplicate data sets

POTENTIAL T... COVID NEED...
- Has been used to se... centers (to consolida... like Number of cases... Equipment, supply c...
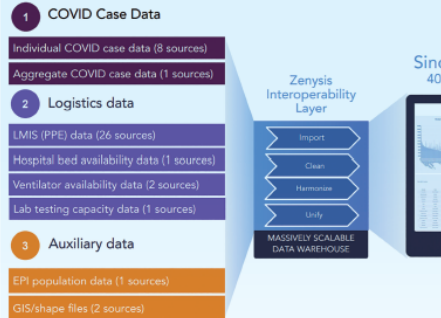
POTENTIAL PROVIDER

ZENYSIS
- **Existing Gavi relationship**: INFUSE pacesetter since 2018
- **Headquarters and other Offices**: Headquarters in US, with local presence in Pakis... Mozambique (Possibility to establish local entities where required by regulations)
- **Advantages of provider**: Ability to work with different languages, flexibility in ran... data quality and formats, while maintaining a high speed to output
- **Challenges**: Dependent on data being made available from the relevant Ministries; requires local capacity to interpret the data insights

A1 | ZENYSIS
EXAMPLE OF USE IN PAKISTA...

OVERVIEW OF WORKING MODEL OF ZENYS... (EXAMPLE FROM PAKISTAN)

1 COVID Case Data
- Individual COVID case data (8 sources)
- Aggregate COVID case data (1 sources)

2 Logistics data
- LMIS (PPE) data (26 sources)
- Hospital bed availability data (1 sources)
- Ventilator availability data (2 sources)
- Lab testing capacity data (1 sources)

3 Auxiliary data
- EPI population data (1 sources)
- GIS/shape files (2 sources)

Zenysis Interoperability Layer
- Import
- Clean
- Harmonize
- Unify

MASSIVELY SCALABLE DATA WAREHOUSE

A1 | ZENYSIS
KEY CONSIDERATIONS

FEASIBILITY

Requirements to set-up the innovation:
- Requires Government permissions to access the required data and share on the cloud platform (If the permission to work on cloud is not granted, a local IT set up would be required to process the information)
- Would need an analytics team in the Ministry of Health or an implementation partner to leverage the output

Time to implementation:
- **Short-Medium (<6 months):** Software is quick to deploy, Time to implementation largely dependent on time needed to partner with Government to establish data sources

INNOVATION FOOTPRINT
- **PAHO/EURO/EMRO:** N/A
- **Asia Pacific:** Pakistan
- **Anglophone Africa:** Ethiopia, Mozambique (Discussions ongoing to set up COVID control room)
- **Francophone Africa:** N/A
- Apart from the above, Zenysis is also a partner of The Global Fund and USAID in ~10 countries

LEVEL OF OPPORTUNITY

Proven efficacy:
- Integrated 300 million health records previously distributed across a dozen systems, to empower health officials to have a holistic view on a single platform (Ethiopia)

Indicative cost:
- **Medium:** ~USD 500K as one-time expenditure (for nation-wide one-time data licensing fee, initial setup), ~50K (based on country need) as recurrent annual fee for IT maintenance (Indicative cost based on example of Mozambique)

Demonstrated outcomes:
- Used in Mozambique as part of a national platform to fight cholera outbreak – Helped reduce new cholera cases from 400 per day to zero in less than a month

Limited view on outcomes; Requires independent assessment