Monitoring and optimising the costs of COVID-19 vaccine delivery platforms and rollout in South Africa

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Outline

• Background
  • SA’s Covid-19 vaccination strategy
  • Project background, aims and objective

• Methodology & Challenges/discussion points
SA’s Covid-19 Vaccination Rollout Strategy

Phase 1 (J&J 1 dose)
17 Feb - 16 May 2021
Health Workers (1.2 mil)

Phase 2 (J&J, Pfizer)
Health care workers + >60 year olds (17th May)
Congregate setting and essential workers (23rd June)
50-59 year olds (15th July)
35-49 years (1 Aug. 2021)

Phase 3 (J&J, Pfizer)
>18 years olds
SA’s Covid 19 Vaccination Strategy

• Target: 67% of adult population by Dec 2021
• Government procures, distributes and oversees vaccination rollout
• Vaccines administered in public and private vaccination sites
  • Clinics
  • Hospitals
  • Outreach: mobile, fixed, temporary (pop-up sites)
• But plans to scale back on outreach
  • integrated programme (80%) by March 2023

Date: Feb 2022
Source: https://sacoronavirus.co.za/latest-vaccine-statistics/
Costing Project Background

• Aims to estimate the costs (financial and economic) of the COVID-19 vaccination programme in South Africa

• Study Outcomes:
  • Total cost of the programme
  • Total cost of each delivery platform
  • Cost per fully vaccinated individuals (1 dose of J&J or 2 doses of Pfizer)

• Part of bigger project: OPTI-VAX SA
  • BMGF-funded project to assess the health impact and costs of South Africa’s COVID-19 vaccination programme
Methodology

• Ingredient-based costing approach

• Adopt a *public* health system/government perspective
  • But will account for financial and in-kind donations from non-governmental sources

• Time horizon
  • 1 year: Feb 2021 to Jan 2022
    • planning for implementation started in Dec 2020
  • Split into phases to reflect evolution of the programme
    • Phase 1, 2 & 3
Methodology

• Data to be collected from all administrative levels of the health system
  • National
  • Provincial
  • Municipality/district
  • Vaccination site

• Data collection method
  • KII (all levels)
  • Direct observation (sites)

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<th>Programme Activities</th>
<th>National</th>
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<th>District</th>
<th>Site</th>
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Sampling Strategy

Total sites per province
- 6 clinics (2 urban, 4 rural)
- 3 hospitals (1 urban, 2 rural)
- All outreach sites linked to selected facilities

But....
Cannot be regarded as a representative sample?
~3500 clinics nationwide

Insufficient sample to estimate cost difference between vaccination sites