Equitable Access Committee (EAC) – 26 May 2020

Attendees: Cherry Kang, David Reddy, John Nkengasong, Soumya Swaminathan, Charlotte Watts

CEPI staff: Richard Hatchett (CEO), Richard Wilder (General Counsel and Head of Business Development), Joe Simmonds-Issler (Chief of Staff), Elen Høeg (Policy Manager; minutes)

Agenda:

1. Meeting minutes May 7th
2. ACT/COVAX – the implications for the role of CEPI EAC
3. Revised version of the paper on diversion of vaccines

ACT/COVAX – the implications for the role of CEPI Equitable access terms and the EAC

Richard Wilder and Richard Hatchett presented the current status of the Access to COVID-19 Tools (ACT) Accelerator and COVAX. The organisational structure of ACT will be comprised of 3 pillars; vaccines, therapeutics and diagnostics, with CEPI and Gavi co-chairing the vaccine pillar; COVAX. COVAX will have three COVAX-workstreams, where CEPI will lead the development & manufacturing workstream, Gavi will lead procurement and delivery, and WHO will lead policy and allocation. CEPI’s equitable access measures will be maintained under ACT/COVAX, and strengthened by allocation schemes led by WHO and a global procurement mechanism led by GAVI. Wording in CEPI partnership agreements is included to ensure that any CEPI-funded vaccines should be directed to the global allocation model.

The importance of participation of e.g. African, Asian scientists and population in development to build confidence, was pointed out. CEPI should aim at broad engagement. Moreover, it is important that CEPI maintains a sustained communication of the clear intent.

CEPI is supportive of the Solidarity trial, and are facilitating discussions with regional regulators, e.g. China. The Developing Countries Vaccine Manufacturers Network (DCVMN) is working with the World Economic Forum (WEF) and India to bring manufacturing capacity into the global pool.

WHO pointed to the need to look at global clinical trial networks and harmonising of clinical trial protocols (i.e. Solidarity protocol with NIH protocol) in order to ensure speed of development of vaccines.

A global procurement mechanism will deliver security both to the manufacturers and the buyers. Including both HICs and LMICs in such a mechanism will increase the pool while decreasing risk, secure predictability and ultimately enable equitable access.

It was pointed out that timelines and principles for WHO allocation mechanism are urgently needed in order to secure speed of development and getting MNCs and private sector onboard. WHO is in the process of outlining the high-level principles. Detail on the operational model is to be developed.

As COVAX will not be a legal entity, CEPI will continue to keep legal responsibility for our partnering agreements. Hence, the EAC will maintain responsibility for the equitable access elements.
Diversion of Vaccine Production

The revised draft was discussed and generally appreciated and approved, with some minor comments to be adopted.

It was recommended that reference be made to CEPI’s mandates and the principles in the Equitable Access policy, to emphasise how CEP’s COVID-19 work is perfectly aligned.

Product requisition recommended as better term than diversion. It was recommended to make the document publicly available and also actively share the document with the WHO.

Resolutions

- EAC members to provide any comments to May 7th minutes by Friday.
- CEPI to provide a finalised version of the position paper on Product requisition.
- The EAC Chair will reconvene the EAC as needed.